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| Fill in this information to identify your case: |   |                                      |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the :        |   |                                      |
| NORTHERN District of ILLINOIS (State)           |   |                                      |
| Case Number (If known):                         | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

# Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:                                 | Identify Yourself  |                            |   |
|---|--|----------------------------|---|
|   |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your                                 | full name  |                            |   |
| goverr<br>identifi                      | he name that is on your<br>ment-issued picture<br>cation (for example,<br>river's license or | Valma First name L         | First name                                    |
| passpo                                  | ort).  | Middle name                | Middle name                                   |
| identifi                                | our picture cation to your meeting e trustee.  | Cherry Last name           | Last name                                     |
| *************************************** | o udoloo.  | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All ot                               | her names you  |                            |   |
|   | used in the last 8   | First name                 | First name                                    |
|   | e your married or<br>n names.  | Middle name                | Middle name                                   |
|   |  | Last name                  | Last name                                     |
|   |  | First name                 | First name                                    |
|   |  | Middle name                | Middle name                                   |
|   |  | Last name                  | Last name                                     |
| -                                       | the last 4 digits of<br>Social Security  | xxx - xx - 8584            | xxx - xx                                      |
| number<br>Individu                      | er or federal<br>dual Taxpayer   | OR                         | OR  |
| Identif                                 | ication number   | <b>9</b> xx - xx           | <b>9</b> xx - xx                              |

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Document Cherry Valma Debtor 1 Case Number (if known)

|    |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|--|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name  Business name  EIN  EIN   | I have not used any business names or EINs.  Business name  Business name  EIN  EIN   |
| 5. | Where you live   | 1443 Dante Ave Number Street   | If Debtor 2 lives at a different address:  Number Street  |
|    |  | Dolton IL 60419 City State ZIP Code COOK County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number Street  P.O. Box  City State ZIP Code | County  If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address.  Number Street  P.O. Box  City State ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy.   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  have another reason. Explain. (See 28 U.S.C. § 1408  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408               |

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Document Valma Debtor 1 Case Number (if known)

| Pa  | Tell the Court About You  | ır Bankruptcy                                | Case  |    |      |   |  |  |
|-----|---|--|---|----|------|---|--|--|
| 7.  | The chapter of the<br>Bankruptcy Code you   |  |   | -  |      | equired by 11 U.S.C. § 342(b) for Individuals bage 1 and check the appropriate box. |  |  |
|     | are choosing to file  | ■ Chapter 7                                  |   |    |      |   |  |  |
|     | under   | ☐ Chap                                       | ☐ Chapter 11  |    |      |   |  |  |
|     |   | ☐ Chap                                       | □ Chapter 12  |    |      |   |  |  |
|     |   | ☐ Chap                                       | Chapter 13  |    |      |   |  |  |
| 8.  | How you will pay the fee  | I need Appli  I required By lates to pay the | ill pay the entire fee when I file my petition. Please check with the clerk's office in your all court for more details about how you may pay. Typically, if you are paying the fee arself, you may pay with cash, cashier's check, or money order. If your attorney is similating your payment on your behalf, your attorney may pay with a credit card or check in a pre-printed address.  The detail pay the fee in installments. If you choose this option, sign and attach the polication for Individuals to Pay The Filing Fee in Installments (Official Form 103A).  The provided Half is a pre-printed for Chapter 7. It is a judge may, but is not required to, waive your fee, and may do so only if your income is than 150% of the official poverty line that applies to your family size and you are unable to the fee in installments). If you choose this option, you must fill out the Application to Have the paper 7 Filing Fee Waived (Official Form 103B) and file it with your petition. |    |      |   |  |  |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | ■ No<br>□ Yes.                               | District Nor  | ne | When | Case Number   |  |  |
|     |   |  | District Nor  | ne | When | Case Number   |  |  |
|     |   |  | District  |    | When | Case Number   |  |  |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate? | ■ No   | District  |    | When | Relationship to you Case Number, if known  MM / DD / YYYY  Relationship to you      |  |  |
|     |   |  | District  |    | When | Case Number, if known   |  |  |
| 11. | Do you rent your residence?   | □ No.<br>■ Yes.                              | Go to line 12  Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?  No. Go to line 12.  Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.   |    |      |   |  |  |

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Document Page 4 of 55 Valma Debtor 1 Case Number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time Yes. Name and location of business business? A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnerhsip, or Number Street LLC. If you have more than one sole proprietorship, use a separate sheed and attach it to this petition. City Zip Code Check the appropriate box to describe your business: ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) ■ None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent Chapter 11 of the balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these **Bankruptcy Code and** documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. 14. Do you own or have any property that poses or is Yes. What is the hazard? alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed? \_ immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street

City

State

ZIP Code

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Debtor 1

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing abou |
|--|
| credit counseling because of:                |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing abou | ιt |
|--|----|
| credit counseling because of:                |    |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-08420 Doc 1 Filed 03/17/17 Entered 03/17/17 13:16:38 Desc Main

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Case Number (if known)

| What kind of debts do you have?   |  | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." |  |  |  |  |  |
|---|--|---|--|--|--|--|--|
|   | No. Go to line 16b. Yes. Go to line 17.          |   |  |  |  |  |  |
|   |  | r business debts? Business debts are debts estment or through the operation of the busine   | -  |  |  |  |  |
|   | No. Go to line 16c. Yes. Go to line 17.          |   |  |  |  |  |  |
|   | 16c. State the type of debts you o               | owe that are not consumer debts or business of  | lebts.   |  |  |  |  |
| Are you filing under Chapter 7?   | No. I am not filing under Cl                     | hapter 7. Go to line 18.  |  |  |  |  |  |
| Do you estimate that after  |  | ter 7. Do you estimate that after any exempt pes are paid that funds will be available to distrib   |  |  |  |  |  |
| any exempt property is excluded and   | No.  |   |  |  |  |  |  |
| administrative expenses are paid that funds will b available for distribution to unsecured creditors? | e ☐Yes.  |   |  |  |  |  |  |
| How many creditors do   | <b>■</b> 1-49                                    | 1,000-5,000   | 25,001-50,000  |  |  |  |  |
| you estimate that you   | <b>50-99</b>                                     | <b>5</b> ,001-10,000  | <b>5</b> 0,001-100,000   |  |  |  |  |
| owe?  | □ 100-199<br>□ 200-999                           | 10,001-25,000   | ☐ More than 100,000  |  |  |  |  |
| How much do you   | \$0-\$50,000                                     | ☐ \$1,000,001-\$10 million  | □\$500,000,001-\$1 billion   |  |  |  |  |
| estimate your assets to   | <b>\$50,001-\$100,000</b>                        | \$10,000,001-\$50 million   | \$1,000,000,001-\$10 billion   |  |  |  |  |
| be worth?   | ☐ \$100,001-\$500,000<br>☐ \$500,001-\$1 million | ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million  | ☐\$10,000,000,001-\$50 billion<br>☐More than \$50 billion  |  |  |  |  |
| How much do you   | \$0-\$50,000                                     | \$1,000,001-\$10 million  | □\$500,000,001-\$1 billion   |  |  |  |  |
| estimate your liabilities   | \$50,001-\$100,000                               | \$10,000,001-\$50 million   | \$1,000,000,001-\$10 billion   |  |  |  |  |
| to be?  | □ \$100,001-\$500,000                            | □ \$50,000,001-\$100 million  | □\$10,000,000,001-\$50 billion   |  |  |  |  |
|   | ☐ \$500,001-\$1 million                          | \$100,000,001-\$500 million   | ☐ More than \$50 billion   |  |  |  |  |
| art 7: Sign Below   |  |   |  |  |  |  |  |
| · you   | I have examined this petition, and correct.      | I declare under penalty of perjury that the info  | rmation provided is true and   |  |  |  |  |
|   |  | oter 7, I am aware that I may proceed, if eligible inderstand the relief available under each chap  | 15 minutes   15 mi |  |  |  |  |
|   |  | did not pay or agree to pay someone who is rid read the notice required by 11 U.S.C. § 342  | ·  |  |  |  |  |
|   | I request relief in accordance with              | the chapter of title 11, United States Code, sp   | ecified in this petition.  |  |  |  |  |
|   |  | ment, concealing property, or obtaining money in fines up to \$250,000, or imprisonment for up d 3571.  |  |  |  |  |  |
|   | /s/ Valma L Cherry Signature of Debtor 1         | Signa   | ture of Debtor 2   |  |  |  |  |
|   |  | _   |  |  |  |  |  |
|   | Executed on03/16/2017                            | 7 Execu   | ited on  |  |  |  |  |

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| Debtor 1 | Valma      | L           | Cherry    | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
|          | First Name | Middle Name | Last Name |                        |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Adam Emil Suchy            | Date      | Date: 03/16/2017  MM / DD / YYYY |            |
|----------------------------------|-----------|----------------------------------|------------|
| Signature of Attorney for Debtor | Date      |                                  |            |
| Adam Emil Suchy                  |           |                                  |            |
| Printed name                     |           |                                  | _          |
| Geraci Law L.L.C.                |           |                                  |            |
| Firm name                        |           |                                  | _          |
| 55 E. Monroe St., #3400          |           |                                  |            |
| Number Street                    |           |                                  | _          |
| Chicago                          | IL.       | 60603                            | _          |
| City                             | State     | ZIP Code                         | _          |
| Contact Phone312-332-1800        | Email add | ndil@ger                         | acilaw.com |
| 6307115                          | IL        |                                  |            |
| Bar number                       | State     |                                  |            |
|                                  |           |                                  |            |

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| Fill in this in           | formation to ide   |                                      |                   |   |
|---------------------------|--------------------|--------------------------------------|-------------------|---|
|                           | Valma              | 1                                    | Cherry            |   |
| Debtor 1                  |                    | <u>L</u>                             |                   | _ |
|                           | First Name         | Middle Name                          | Last Name         |   |
| Debtor 2                  |                    |                                      |                   | _ |
| (Spouse, if filing)       | First Name         | Middle Name                          | Last Name         |   |
| United States             | Bankruptcy Court f | or the : <u>NORTHERN</u> District of | _ <u>ILLINOIS</u> |   |
| Case Number<br>(If known) | r                  |                                      |                   |   |
|                           |                    |                                      |                   |   |

# Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: Summarize Your Assets  |   |
|--|---|
|  | <b>Your assets</b><br>Value of what you own |
| Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | <u>\$0</u>                                  |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$ 2,655                                    |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$ 2,655                                    |
|  |   |
| Part 2: Summarize Your Liabilities   |   |
|  | Your liabilities Amount you owe             |
|  |   |
| <ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>   | \$0   |
|  | \$0   |
| <ul> <li>2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> <li>3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> </ul>  | \$0<br>\$40,681                             |
| <ol> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> <li>Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> <li>Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F</li> </ol> | \$0<br>\$40,681                             |
| <ol> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> <li>Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> <li>Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F</li> </ol> | \$0<br>\$40,681                             |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                          | \$0<br>\$40,681                             |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                          | \$0<br>\$40,681                             |

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Document Valma Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name

| Part 4:  | Answer These Questions for Administrative and Statistical Records  |             |  |  |  |  |
|--|--|-------------|--|--|--|--|
| _  | 6. Are you filing for bankruptcy under Chapter 7, 11 or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes |             |  |  |  |  |
| 7. What kind of debt do you have?  Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. |  |             |  |  |  |  |
|  | 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$3,358.09             |             |  |  |  |  |
|  | e following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> : Fart 4 of Schedule E/F, copy the following:  | Total claim |  |  |  |  |
| 9a. Dom  | estic support obligations (Copy line 6a.)  | \$_0.00     |  |  |  |  |
| 9b. Taxe   | es and certain other debts you owe the government. (Copy line 6b.)   | \$_0.00     |  |  |  |  |
| 9c. Clain  | ns for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_0.00     |  |  |  |  |
| 9d. Stude  | ent loans. (Copy line 6f.)   | \$_0.00     |  |  |  |  |
|  | gations arising out of a separation agreement or divorce that you did not report as laims. (Copy line 6g.)   | \$ 0.00     |  |  |  |  |
| 9f. Debt   | s to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | \$_0.00     |  |  |  |  |
| 9g. <b>Tota</b> l  | I. Add lines 9a through 9f.  | \$_0.00     |  |  |  |  |

|   | Caso 1 <sup>-</sup>   | 7 09/20 Doc 1   | Eilad 02/17/17   | Entered 03/17/17 13:16:3 | 8 Des   | sc Main  |                  |
|---|---|---|--|--------------------------|---------|--|------------------|
| Fill in this in   |   | ntify your case and this filing   |  | 0 of 55                  |         |  |                  |
| Debtor 1  | Valma   | L   | Cherry   |                          |         |  |                  |
| D.H.  | First Name  | Middle Name   | Last Name  |                          |         |  |                  |
| Debtor 2<br>(Spouse, if filing)   | First Name  | Middle Name   | Last Name  |                          |         |  |                  |
| United States   | Bankruptcy Court fo   | or the : <u>NORTHERN</u> District   | of <u>ILLINOIS</u>   |                          |         |  |                  |
| Case Number   |   |   | (State)  |                          |         | Check if this is   | an               |
| (If known)  | - 10CA  | /D  |  |                          |         | amended filing   | J                |
|   | orm 106A<br>e A/B: Pr   |   |  |                          |         |  |                  |
| n each category<br>ategory where<br>esponsible for<br>ages, write you     | y, separately lisi<br>you think it fits<br>supplying corre<br>ur name and cas<br>Describe Each Re | t and describe items. List an<br>best. Be as complete and ac  | curate as possible. If two me<br>e is needed, attach a separa<br>r every question.<br>ner Real Esate You Own or Ha |                          | equally |  | 12/15            |
| No.   | Describe  | <b>.</b>  | 3,   | ,                        |         |  |                  |
| _   |   | portion you own for all of you  | ur entries fro Part 1, includi   | ng any entries for pages |         |  |                  |
| you have at   | tached for Part   | 1. Write that number here   |  | >                        |         |  | \$0.00           |
| Part 2:   | Describe Your Vel   | hicles  |  |                          |         |  |                  |
| 03. Cars, vans No. Yes. 04. Watercraft Examples: No. Yes. 5. Add the doll | Describe , aircraft, motor Boats, trailers, mot Describe lar value of the p                       | es. If you lease a vehicle, also s, sport utility vehicles, moto homes, ATVs and other recr ors, personal watercraft, fishing ve portion you own for all of you 2. Write that number here | eational vehicles, other veh   | accessories              |         |  | \$ 0.00          |
| Part 3:   | Describe Your Pe  | rsonal and Household Items  |  |                          |         |  |                  |
|   | have any legal  | or equitable interest in any o  | of the following items?  |                          |         | Current value of portion you own Do not deduct secur or exemptions | ?                |
|   | I goods and furr<br>Major appliances, f<br>Describe   | furniture, linens, china, kitchenwar  |  |                          | 04.450  |  |                  |
|   | Televisions and rac   | Furniture, linens, small applianc   | tal equipment; computers, printe   | rs, scanners; music      | \$1,150 | \$   | <u>1,150.0</u> 0 |
| No. Yes.  | Describe  | TV, cell phone  |  |                          | \$150   | \$   | <u> 150.0</u> 0  |
|   | Antiques and figuri   | nes; paintings, prints, or other arts collections; other collections, mem   |  | objects;                 |         |  |                  |
| Yes.  | Describe  |   |  |                          |         | \$   | 0.00             |

Official Form 106A/B Record # 724009 Schedule A/B: Property Page 1 of 6

Valma

Filed 03/17/17
Cherry
Document
Last Name Entered 03/17/17 13:16:38 Page 11 of 55 umber (if known) Case 17-08420 Desc Main Doc 1 First Name Middle Name

|  | Sports photograph  | nic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes   |   |
|--|--|---|---|
|  |  | nic, exercise, and other hoody equipment; dicycles, pool tables, golf clubs, skis; candes nusical instruments   |   |
| Yes.   | Describe   |   | s 0.00  |
| 10. Firearms   |  |   | <u> </u>  |
| Examples:  | Pistols, rifles, shot  | guns, ammunition, and related equipment   |   |
| Yes.   | Describe   |   | \$0.00  |
|  | Everyday clothes,  | furs, leather coats, designer wear, shoes, accessories  |   |
| No.  | Describe   |   |   |
| 165.   | Describe   | Everyday clothes, Winter Coats shoes, accessories \$250   | \$ 250.00   |
| 12. Jewelry  Examples: gold, silver  No.   |  | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,  |   |
| Yes.   | Describe   | Everyday and Costume jewelry \$500  |   |
| 13. Non-farm   | animals  |   | \$500.00  |
| Examples:  | Dogs, cats, birds,   | norses  |   |
| Yes.   | Describe   |   |   |
|  |  | Dog \$0   | \$0.00  |
| 14. Any other No.  | personal and he  | busehold items you did not already list, including any health aids you did not list   |   |
| Yes.   | Describe   | Books, CDs, DVDs & Family Photos \$300  |   |
|  |  |   | \$ 300.00   |
| 15 Add the de  | ller velue of all  | of your entries from Dart 2, including any entries for pages you have attached  | \$  |
|  |  | of your entries from Part 3, including any entries for pages you have attached>   | \$2,350.00  |
| for Part 3.  |  | per here>   |   |
| for Part 3.  | Write that numb  | per here>   |   |
| for Part 3.  Part 4:  Do you own o   | Write that numb  | nancial Assets  | \$2,350.00  Current value of the portion you own?  Do not deduct secured claims                   |
| for Part 3.  Part 4:  Do you own o  16. Cash  Examples:  No.   | Write that numb Describe Your Fir r have any legal Money you have ir   | or equitable interest in any of the following?  | \$2,350.00  Current value of the portion you own?  Do not deduct secured claims                   |
| for Part 3.  Part 4:  Do you own o   | Write that numb  | or equitable interest in any of the following?  | \$2,350.00  Current value of the portion you own?  Do not deduct secured claims                   |
| for Part 3.  Part 4:  Do you own o  16. Cash  Examples:  No.  Yes.  17. Deposits of  | Write that numb Describe Your Fir r have any legal Money you have in Describe  | or equitable interest in any of the following?  In your wallet, in your home, in a safe deposit box, and on hand when you file your petition  | \$2,350.00  Current value of the portion you own?  Do not deduct secured claims or exemptions     |
| for Part 3.  Part 4:  Do you own o  16. Cash  Examples:  No.  Yes.  17. Deposits of Examples:  | Write that numb Describe Your Fir r have any legal Money you have ir Describe of money Checking, savings   | or equitable interest in any of the following?  | \$2,350.00  Current value of the portion you own?  Do not deduct secured claims or exemptions     |
| for Part 3.  Part 4:  Do you own o  16. Cash  Examples:  No.  Yes.  17. Deposits of Examples: and other s  | Write that numb Describe Your Fir r have any legal Money you have ir Describe of money Checking, savings   | per here  | \$2,350.00  Current value of the portion you own?  Do not deduct secured claims or exemptions     |
| for Part 3.  Part 4:  Do you own o  16. Cash  Examples:  No.  Yes.  17. Deposits o  Examples: and other s  No.   | Write that number of money Checking, savings similar institutions.   | per here  | \$2,350.00  Current value of the portion you own?  Do not deduct secured claims or exemptions  \$ |
| for Part 3.  Part 4:  Do you own o  16. Cash  Examples:  No.  Yes.  17. Deposits o  Examples: and other s  No.   | Write that number of money Checking, savings similar institutions.   | per here  | \$2,350.00  Current value of the portion you own?  Do not deduct secured claims or exemptions     |
| for Part 3.  Part 4:  Do you own o  16. Cash  Examples:  No.  Yes.  17. Deposits of Examples: and others and others and others.  Yes.                    | Write that numb Describe Your Fir r have any legal Money you have in Describe of money Checking, savings similar institutions. Describe  | per here  | \$2,350.00  Current value of the portion you own? Do not deduct secured claims or exemptions  \$  |
| for Part 3.  Part 4:  Do you own o  16. Cash  Examples:  No.  Yes.  17. Deposits of Examples: and others and others and others.  Yes.                    | Write that numb Describe Your Fir r have any legal Money you have in Describe of money Checking, savings similar institutions. Describe  | ancial Assets  or equitable interest in any of the following?  n your wallet, in your home, in a safe deposit box, and on hand when you file your petition  or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, ff you have multiple accounts with the same institution, list each.  Account Type: Institution name: Savings Account US Bank Checking Account US Bank  ublicly traded stocks ment accounts with brokerage firms, money market accounts   | \$2,350.00  Current value of the portion you own? Do not deduct secured claims or exemptions  \$  |
| for Part 3.  Port 4:  Do you own o  16. Cash  Examples:  No.  Yes.  17. Deposits of Examples: and other sign of No.  Yes.  18. Bonds, mu Examples:       | Write that numb Describe Your Fir r have any legal Money you have in Describe of money Checking, savings similar institutions. Describe  | nancial Assets  or equitable interest in any of the following?  n your wallet, in your home, in a safe deposit box, and on hand when you file your petition  or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, for you have multiple accounts with the same institution, list each.  Account Type:  Savings Account  US Bank  US Bank  ublicly traded stocks   | \$2,350.00  Current value of the portion you own? Do not deduct secured claims or exemptions  \$  |
| for Part 3.  Part 4:  Do you own o  16. Cash  Examples:  No.  Yes.  17. Deposits of Examples: and other s  No.  Yes.  18. Bonds, mu  Examples: No.  Yes. | Write that numb Describe Your Fir r have any legal Money you have in Describe of money Checking, savings similar institutions. Describe  Atual funds, or p Bond funds, invest                    | ancial Assets  or equitable interest in any of the following?  n your wallet, in your home, in a safe deposit box, and on hand when you file your petition  or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, ff you have multiple accounts with the same institution, list each.  Account Type: Institution name: Savings Account US Bank Checking Account US Bank  ublicly traded stocks ment accounts with brokerage firms, money market accounts   | \$2,350.00  Current value of the portion you own?  Do not deduct secured claims or exemptions  \$ |
| for Part 3.  Part 4:  Do you own o  16. Cash  Examples:  No.  Yes.  17. Deposits of Examples: and other s  No.  Yes.  18. Bonds, mu  Examples: No.  Yes. | Write that numb Describe Your Fir r have any legal Money you have in Describe of money Checking, savings similar institutions. Describe  Describe  utual funds, or p Bond funds, invest Describe | particular Assets  or equitable interest in any of the following?  In your wallet, in your home, in a safe deposit box, and on hand when you file your petition  or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, for you have multiple accounts with the same institution, list each.  Account Type:  Institution name:  Savings Account  US Bank  Checking Account  US Bank  ublicly traded stocks ment accounts with brokerage firms, money market accounts  Institution or issuer name: | \$2,350.00  Current value of the portion you own?  Do not deduct secured claims or exemptions  \$ |

Case 17-08420 Doc 1 Filed 03/17/17 Entered 03/17/17 13:16:38 Valma Debtor 1 <del>Döcument</del>

Page 12 of 55 Pumber (if known)

Desc Main

20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No. Yes. Describe..... Issuer name: 0.00 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No. Type of account and Institution name: Describe..... Yes **SURS** Pension plan Unknown 0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications No. Yes. Describe..... Institution name or individual: 0.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Describe..... Issuer name and description: 0.00 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No. Describe..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): Yes. 0.00 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers No. Yes. Describe..... 0.00 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No. Describe..... Yes. 0.00 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No. Yes. Describe..... 0.00 Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions 28. Tax refunds owed to you Yes. Describe..... 0.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No. Describe..... 0.00 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No. Yes. Describe..... 0.00

Desc Main

0.00

First Name 31. Interest in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No. Company Name & Beneficiary: Yes Describe..... Reliastar Whole Life Insurance Policy with no cash surrender value. 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No. Yes. Describe..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. Yes. Describe..... 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights Yes. Describe..... 0.00 35. Any financial assets you did not already list No. Describe..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$305.00 for Part 4. Write that number here ---> Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Yes Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned No. Describe..... Yes. 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No. Yes Describe..... 0.00 41. Inventory No. Describe..... Yes. 0.00 42. Interests in partnerships or joint ventures No. Name of Entity and Percent of Ownership: Describe..... Yes. 0.00 43. Customer lists, mailing lists, or other compilations Nο

Describe.....

Yes.

| 44. Any business-related property you did not already list No.  |                 |
|---|-----------------|
| Yes. Describe   | \$0.00          |
| 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here>                | \$ 0.00         |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. |                 |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  |                 |
| Yes. Describe   | \$ <u> </u>     |
| 47. Farm animals  Examples: Livestock, poultry, farm-raised fish  |                 |
| ■ No.  Yes. Describe  | s 0.00          |
| 48. Crops—either growing or harvested  No.  | <u> </u>        |
| Yes. Describe   | \$0.00          |
| 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  |                 |
| Yes. Describe   | \$ <u>0.0</u> 0 |
| 50. Farm and fishing supplies, chemicals, and feed No.  |                 |
| Yes. Describe   | \$0.00          |
| 51. Any farm- and commercial fishing-related property you did not already list  No.   |                 |
| Yes. Describe   | \$0.00          |
| 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here                 | \$0.00          |
| Describe All Property You Own or Have an Interest in That You Did Not List Above  |                 |
| 53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No.                                      |                 |
| Yes. Describe   | \$ <u>0.0</u> 0 |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here>  | \$0.00          |

List the Totals of Each Part of this Form Part 8: \$ 0.00 55. Part 1: Total real estate, line 2 \$ 0.00 56. Part 2: Total vehicles, line 5 \$ 2,350.00 57. Part 3: Total personal and household items, line 15 \$ 305.00 58. Part 4: Total financial assets, line 36 \$ 0.00 59. Part 5: Total business-related property, line 45 \$ 0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00 61. Part 7: Total other property not listed, line 54 \$ 2,655.00 \$ 2,655.00 62. Total personal property. Add lines 56 through 61. ..... 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$2,655.00

Official Form 106A/B Record # 724009 Schedule A/B: Property Page 6 of 6

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| Fill in this in     | formation to identi    | fy your case:                       |                  |
|---------------------|------------------------|-------------------------------------|------------------|
| Debtor 1            | Valma                  | L                                   | Cherry           |
|                     | First Name             | Middle Name                         | Last Name        |
| Debtor 2            |                        |                                     |                  |
| (Spouse, if filing) | First Name             | Middle Name                         | Last Name        |
| United States       | Bankruptcy Court for t | the : <u>NORTHERN</u> District of _ | ILLINOIS (State) |
| Case Number         | г                      |                                     |                  |
| (If known)          |                        |                                     |                  |

# Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. Which set of ex      | emptions are you claiming? Check                                 | one only, even if your spo           | ouse is filing with you.  |                                    |
|-------------------------|--|--------------------------------------|---|------------------------------------|
| You are clair           | ming state and federal nonbankrupt                               | cy exemptions . 11 U.S.C.            | § 522(b)(3)   |                                    |
| You are clair           | ming federal exemptions. 11 U.S.C.                               | § 522(b)(2)                          |   |                                    |
| 2. For any propert      | y you list on <i>Schedule A/B</i> that yo                        | u claim as exempt, fill in t         | the information below.  |                                    |
| •                       | on of the property and line on hat lists this property           | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |
|                         |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |
| Brief description:      | Furniture, linens, small appliances, table & chairs, bedroom set | \$ <u>1,150</u>                      | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$1,150.00 |
| Line from Schedule A/B: | 06   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief<br>description:   | TV, cell phone   | \$ <u>150</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$150.00   |
| Line from Schedule A/B: | 07   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief description:      | Everyday clothes, Winter Coats shoes, accessories                | \$_250                               | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$250.00   |
| Line from Schedule A/B: | <u>11</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief<br>description:   | Everyday and Costume jewelry                                     | \$ <u>500</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$500.00   |
| Line from Schedule A/B: | 12   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|                         |  |                                      |   |                                    |
| Official Form 106C      | Record # 724009  | Schedule C: T                        | he Property You Claim as Exempt                                 | Page 1 of 2                        |

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Debtor 1 Valma L Document Page 17 of 55 Asse Number (if known)

Middle Name

Last Name

| ا | Part 2: Additi          | ional Page   |                                      |   |                                    |
|---|-------------------------|--|--------------------------------------|---|------------------------------------|
|   |                         | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |
|   |                         |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |
|   | Brief description:      | Books, CDs, DVDs & Family Photos                       | <u>\$ 300</u>                        | \$  | 735 ILCS 5/12-1001(a) - \$300.00   |
|   | Line from Schedule A/B: | 14   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|   | Brief description:      | Savings Account, US Bank, 5.00                         | <u>\$5</u>                           | \$  | 735 ILCS 5/12-1001(b) - \$5.00     |
|   | Line from Schedule A/B: | <u>17</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|   | Brief description:      | Checking Account, US Bank, 300.00                      | \$ 300                               | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$300.00   |
|   | Line from Schedule A/B: | <u>17</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|   | Brief description:      | Pension plan, SURS, 0.00                               | \$Unknown                            |   | 735 ILCS 5/12-1006 - \$0.00        |
|   | Line from Schedule A/B: | 21   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|   | □ No □ Yes.             |  |                                      |   |                                    |
| _ | ☐ Yes.                  |  |                                      |   |                                    |
|   |                         |  |                                      |   |                                    |
|   |                         |  |                                      |   |                                    |
|   |                         |  |                                      |   |                                    |
|   |                         |  |                                      |   |                                    |
|   |                         |  |                                      |   |                                    |
|   |                         |  |                                      |   |                                    |
|   |                         |  |                                      |   |                                    |
|   |                         |  |                                      |   |                                    |
|   |                         |  |                                      |   |                                    |
|   | ifficial Form 1060      | Record # 724009  | Schedule C: The                      | Property You Claim as Exempt                                    | Page 2 of 2                        |

| Fi    | ll in this in              | Case 17<br>formation to ident |  | Filad 02/17/17                |                   | 03/17/17<br>of 55 | 13:16:38   | Desc Main  |                                   |
|-------|----------------------------|-------------------------------|--|-------------------------------|-------------------|-------------------|--|--|-----------------------------------|
| D     | ebtor 1                    | Valma                         | L  | Cherry                        |                   |                   |  |  |                                   |
| D     | ebtor 2                    | First Name                    | Middle Name  | Last Name                     |                   |                   |  |  |                                   |
| (S    | pouse, if filing)          | First Name                    | Middle Name  | Last Name                     |                   |                   |  |  |                                   |
| С     | nited States<br>ase Number |                               | the : <u>NORTHERN</u> District of  | ILLINOIS (State)              |                   |                   |  | Check if thi   |                                   |
|       |                            | orm 106D  D: Creditor         | rs Who Have Clain  | ns Secured by I               | Property          |                   |  |  | 12/15                             |
| infor | mation. If r               | nore space is need            | ossible. If two married peopl<br>ded, copy the Additional Page<br>and case number (if known)   | e, fill it out, number the e  |                   |                   |  | ny   |                                   |
| 1. [  | Oo any cre                 | ditors have claims            | secured by your property?  |                               |                   |                   |  |  |                                   |
|       | No. Ch                     | neck this box and su          | ubmit this form to the court with  | h your other schedules. Y     | ou have nothing e | else to report o  | n this form.   |  |                                   |
|       | Yes. Fi                    | II in all of the inform       | ation below.   |                               |                   |                   |  |  |                                   |
| Pa    | art 1:                     | List All Secured Cla          | ims  |                               |                   |                   |  |  |                                   |
|       | for each c                 | laim. If more than            | creditor has more than one secone creditor has a particular clackains in alphabetical order ac | aim, list the other creditors | s in Part 2.      |                   | Column A  Amount of claim  Do not deduct the value of collateral | Column A  Value of collateral that supports this claim | Column C Unsecured portion If any |
|       |                            |                               |  |                               |                   |                   |  |  |                                   |

|                                       |  | Casa 17 09   | 2420 Doc  | 1 Filod 02/17/17  | Entered 03/17/17 13:1   | L6:38   | Desc Main              |                    |
|---------------------------------------|--|--|---|---|---|---|------------------------|--------------------|
| Fill                                  | in this in   | formation to identify y  | our case:   |   | 9 of 55   |   |                        |                    |
| Deh                                   | otor 1   | Valma  | L   | Cherry  |   |   |                        |                    |
| DCL                                   | 7.01   | First Name   | Middle Name   | Last Name   |   |   |                        |                    |
| Deb                                   | otor 2   |  |   |   |   |   |                        |                    |
| (Spo                                  | use, if filing)  | First Name   | Middle Name   | Last Name   |   |   |                        |                    |
| Uni                                   | ted States   | Bankruptcy Court for the :   | NORTHERN D  | istrict of ILLINOIS   |   |   |                        |                    |
|                                       |  |  |   | (State)   |   |   | ☐ Check if             | this is an         |
|                                       | se Number<br>(nown)  |  |   |   |   |   | amende                 |                    |
| ⊃ffi∠                                 | sial E   | orm 106E/F   |   |   |   |   |                        | - ······g          |
|                                       | <u>Jai i (</u>   | OIIII TOOL/I   |   |   |   |   |                        | 40/45              |
| <u>Sch</u>                            | <u>edule</u>   | E/F: Creditors   | <u>s Who Have</u>   | <u> Unsecured Claims</u>  |   |   |                        | 12/15              |
| ist the<br>I/B: Pi<br>redito<br>eeded | e other paroperty (Cors with party and the land and the l | arty to any executory o<br>Official Form 106A/B) a<br>artially secured claim | contracts or unex<br>and on Schedule<br>s that are listed in<br>out, number the e<br>ur name and case | pired leases that could result in a<br>G: Executory Contracts and Unex<br>I Schedule D: Creditors Who Have<br>entries in the boxes on the left. Att<br>number (if known). | and Part 2 for creditors with NONPF claim. Also list executory contracts pired Leases (Official Form 106G). It is claims Secured by Property. If motach the Continuation Page to this p | on <i>Schedul</i> e<br>Do not includ<br>re space is | е                      |                    |
| 1 Do                                  | any cred   | ditors have priority un  | secured claims a  | nainst vou?   |   |   |                        |                    |
| 50                                    |  | to Part 2.   | occurca cianno a  | gumot you.  |   |   |                        |                    |
|                                       | 1  | 10 Fait 2.   |   |   |   |   |                        |                    |
| <br>. Lie                             |  | our priority upsecured   | d claime If a credit  | tor has more than one priority unser  | cured claim, list the creditor separatel  | v for each cla                                      | aim For                |                    |
| ea<br>no                              | ch claim<br>onpriority   | listed, identify what typ amounts. As much as p                              | ne of claim it is. If a possible, list the cla  | claim has both priority and nonprio<br>aims in alphabetical order according   | rity amounts, list that claim here and a<br>g to the creditor's name. If you have n<br>s a particular claim, list the other cred  | show both prince than two                           | iority and<br>priority |                    |
| (F                                    | or an exp  | lanation of each type of   | of claim, see the ins   | structions for this form in the instruc   | •   |   | <b>.</b>               |                    |
|                                       |  |  |   |   | 10  | otal claim  | Priority<br>amount     | Nonpriority amount |
| Par                                   | 1 2: L   | List All of Your NONPRI  | ORITY Unsecured (   | Claims  |   |   |                        |                    |
| 3 Do                                  | any cred   | ditors have nonpriorit   | v unsecured claim   | ns against you?   |   |   |                        |                    |
| 5. DC                                 |  | •  | -   | mit this form to the court with your c  | other cohedules   |   |                        |                    |
|                                       | i<br>I   | u nave nothing to repo   | it iii tiiis part. Subi   | milt this form to the court with your c   | uner scriedules.  |   |                        |                    |
| 4 Lie                                 | Yes.   | our nonnriority unsoc  | urod claims in the  | a alphabotical order of the creditor  | who holds each claim. If a creditor h   | has more tha  | n one                  |                    |
| no<br>ind                             | npriority of   | unsecured claim, list th   | ne creditor separate<br>e creditor holds a p  | ely for each claim. For each claim lis  | sted, identify what type of claim it is. E<br>ors in Part 3.If you have more than thr   | Do not list cla                                     | ims already            |                    |
|                                       | Capital  | ONE DANK HEA N   |   |   | NII II I  |   |                        | Total claim        |
| 4.1                                   | Creditor's N   | ONE BANK USA N   |   | Last 4 digits of account number _   | NULL  |   |                        | \$ <u>502.00</u>   |
|                                       |  | Capital One Dr   |   | When was the debt incurred?   | 2006-2016   |   |                        |                    |
|                                       | Number   | Street   |   |   |   |   |                        |                    |
|                                       |  |  |   | As of the date you file, the claim is   | : Check all that apply.   |   |                        |                    |
|                                       | Richmor  | nd VA  | A 23238   | Contingent  |   |   |                        |                    |
|                                       | City   |  | ate Zip Code  | Unliquidated  |   |   |                        |                    |
| ۷                                     | _  | the debt? Check one.   |   | Disputed  |   |   |                        |                    |
|                                       | Debtor 1   | •  |   | T (NONDDIODITY  | alaba.  |   |                        |                    |
| L                                     | Debtor 2   | •  |   | Type of NONPRIORITY unsecured Student loans   | ciaim:  |   |                        |                    |
| Ļ                                     | =  | 1 and Debtor 2 only one of the debtors and an                                | nother  | Obligations arising out of a separa   | tion agreement or divorce   |   |                        |                    |
| L                                     | =  | if this claim relates to a   |   | that you did not report as priority cl  | -   |   |                        |                    |
| L                                     | _  | unity debt   | •   | Debts to pension or profit-sharing  |   |   |                        |                    |
| l:                                    |  | n subject to offest?   |   | _   |   |   |                        |                    |
|                                       | No<br>Type   |  |   | Other. Specify Credit Card or   | Credit Use  |   |                        |                    |
|                                       | Yes  |  |   |   |   |   |                        |                    |

| Debtor 1 | <sub>I</sub> Valma | Case 17-08420                 | Doc 1           | Filed 03/17/17<br>Document         | Enter<br>Page 2 | red 03/17/17 13:16:38<br>20 of 55<br>Case Number (if known) | Desc Main | _                   |
|----------|--------------------|-------------------------------|-----------------|------------------------------------|-----------------|---|-----------|---------------------|
|          | First Name         | Middle Name                   |                 | Last Name                          |                 |   |           |                     |
| Par      | You                | NONPRIORITY Unsecured Cla     | ims - Continuat | ion Page                           |                 |   |           |                     |
| After li | sting any e        | ntries on this page, number t | hem beginning   | g with 4.4, followed by 4.5        | 5, and so fo    | rth.  |           | Total Claim         |
| 4.2      | Chase Mo           | rtgage                        | _ Last          | 4 digits of account number         | r               |   |           | <b>\$</b> _1.00     |
|          | Creditor's Nar     |                               |                 |                                    |                 |   |           |                     |
|          | 3415 Visio         |                               | _ Whe           | n was the debt incurred?           |                 | <del></del>   |           |                     |
|          | Number             | Street                        | _               |                                    |                 |   |           |                     |
|          |                    |                               |                 | of the date you file, the claim    | n is: Check a   | all that apply.   |           |                     |
|          | Columbus           | OH 43219                      | =               | Contingent<br>Inliquidated         |                 |   |           |                     |
|          | City               | State Zip Coo                 | te 📛            | Disputed                           |                 |   |           |                     |
| , v      | Debtor 1 o         | e debt? Check one.            | <u></u>         |                                    |                 |   |           |                     |
| <u> </u> | Debtor 2 o         | •                             | Tyne            | e of NONPRIORITY unsecur           | red claim:      |   |           |                     |
| ř        | =                  | nd Debtor 2 only              |                 | Student loans                      | rea ciaiii.     |   |           |                     |
| Ť        | =                  | e of the debtors and another  |                 | Obligations arising out of a sepa  | aration agree   | ment or divorce   |           |                     |
| Ī        | Check if t         | his claim relates to a        | th              | nat you did not report as priorit  | ty claims       |   |           |                     |
|          | communi            | -                             |                 | ebts to pension or profit-sharir   | ing plans, and  | other similar debts   |           |                     |
| ls       | No                 | subject to offest?            |                 |                                    |                 |   |           |                     |
| Ī        | Yes                |                               | 0               | Other. Specify                     |                 | <del></del>   |           |                     |
| 4.3      | Chrysler C         | Capital                       | _ Last          | 4 digits of account number         | r1000           | )   |           | \$ <u>25,202.00</u> |
|          | Creditor's Nar     |                               |                 |                                    | 201/            | 1 10 10   |           |                     |
|          | Po Box 96          |                               | Whe             | n was the debt incurred?           | 2012            | 4-10-10   |           |                     |
|          | Number             | Street                        |                 |                                    |                 |   |           |                     |
|          |                    |                               |                 | f the date you file, the clain     | m is: Check a   | all that apply.   |           |                     |
|          | Fort Worth         | TX 76161                      | =               | Contingent                         |                 |   |           |                     |
|          | City               | State Zip Coo                 | te 📛            | Jnliquidated                       |                 |   |           |                     |
| V        |                    | e debt? Check one.            | П               | Disputed                           |                 |   |           |                     |
|          | Debtor 1 o         | •                             | _               |                                    |                 |   |           |                     |
| L        | Debtor 2 o         | nıy<br>nd Debtor 2 only       |                 | e of NONPRIORITY unsecur           | red claim:      |   |           |                     |
| L<br>F   | =                  | e of the debtors and another  | =               | Obligations arising out of a sepa  | naration agree  | ment or divorce   |           |                     |
|          | =                  | his claim relates to a        |                 | nat you did not report as priority | -               |   |           |                     |
| L        | communi            |                               |                 | Debts to pension or profit-sharing | ing plans, and  | other similar debts   |           |                     |
| l:       |                    | subject to offest?            | _               |                                    |                 |   |           |                     |
|          | No                 |                               | 0               | Other. Specify Deficiency,         | Repo'd/Sur      | r'd Auto  |           |                     |
| 4.4      | Yes<br>CITI        |                               | Last            | 4 digits of account number         | r NUL           | L   |           | \$ 3,109.00         |
| 7.7      | Creditor's Nar     | ne                            |                 | <b>g</b>                           |                 | <del></del>   |           | -                   |
|          | Po Box 62          | 41                            | Whe             | n was the debt incurred?           | 2015            | 5-2016  |           |                     |
|          | Number             | Street                        |                 |                                    |                 |   |           |                     |
|          |                    |                               | As of           | f the date you file, the claim     | m is: Check a   | all that apply.   |           |                     |
|          | Sioux Falls        | s SD 57117                    |                 | Contingent                         |                 |   |           |                     |
|          | City               | State Zip Coo                 | _ ∐∪            | Inliquidated                       |                 |   |           |                     |
| v        |                    | e debt? Check one.            | ∐□              | Disputed                           |                 |   |           |                     |
| ļ        | Debtor 1 o         | •                             |                 |                                    |                 |   |           |                     |
|          | Debtor 2 o         | nlv                           | Type            | of NONPRIORITY unsecur             | rod claim:      |   |           |                     |

Debtor 1 and Debtor 2 only

Is the claim subject to offest?

community debt

At least one of the debtors and another Check if this claim relates to a

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Other. Specify \_\_\_ Credit Card or Credit Use

Student loans

No

Yes

Doc 1 Filed 03/17/17 Entered 03/17/17 13:16:38 Desc Main Case 17-08420 Page 21 of 55 Case Number (if known) Document Valma Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** City of Chicago Dept of Water \$ 500.00 Last 4 digits of account number Creditor's Name 121 N. LaSalle St When was the debt incurred? Number Room 107 As of the date you file, the claim is: Check all that apply. Contingent 60602 Chicago Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Utility Bills/Cellular Service Yes COMENITY BANK/Avenue NULL \$ 1,155.00 4.6 Last 4 digits of account number Creditor's Name 2013-2016 Po Box 182789 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent OH 43218 Columbus Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify \_\_\_ Credit Card or Credit Use COMENITY BANK/JsscIndn **NULL** \$ 405.00 4.7 Last 4 digits of account number Creditor's Name 2015-2016 Po Box 182789 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Columbus OH 43218 Unliquidated City State Zip Code Disputed Who owes the debt? Check one.

|          | Case 17-   | 08420 D            | oc 1 Filed 03/17/17 Entered 03/17/17 13:16:38 Desc Main                  |                  |
|----------|--|--------------------|--|------------------|
| Debtor 1 | Valma  | L                  | Document Page 22 of 55 Case Number (if known)                            | _                |
|          | First Name                                       | Middle Name        | Last Name  |                  |
| Par      | Your NONPRIORITY U                               | Insecured Claims - | Continuation Page  |                  |
| After li | sting any entries on this pa                     | ge, number them    | beginning with 4.4, followed by 4.5, and so forth.                       | Total Claim      |
| 4.8      | COMENITY BANK/Roama                              | ns                 | Last 4 digits of account number NULL                                     | \$ <u>240.00</u> |
|          | Creditor's Name                                  |                    | When was the debt incurred 2 2015-2016                                   |                  |
|          | Po Box 182789  Number Street                     |                    | When was the debt incurred?  |                  |
|          |  |                    | As of the date you file, the claim is: Check all that apply.             |                  |
|          |  |                    | Contingent   |                  |
|          | Columbus   | OH 43218           | ☐ Unliquidated   |                  |
| v        | City  Vho owes the debt? Check one               | State Zip Code     | Disputed   |                  |
|          | Debtor 1 only                                    |                    | <del>-</del>   |                  |
|          | Debtor 2 only                                    |                    | Type of NONPRIORITY unsecured claim:                                     |                  |
|          | Debtor 1 and Debtor 2 only                       |                    | Student loans  |                  |
|          | At least one of the debtors an                   | d another          | Obligations arising out of a separation agreement or divorce             |                  |
|          | Check if this claim relates                      | to a               | that you did not report as priority claims                               |                  |
| ls       | community debt<br>s the claim subject to offest? |                    | Debts to pension or profit-sharing plans, and other similar debts        |                  |
|          | No   |                    | Other. Specify Credit Card or Credit Use                                 |                  |
|          | Yes  |                    | Offici. Opecity  |                  |
| 4.9      | Consumer Cellular                                |                    | Last 4 digits of account number 1631                                     | <u>\$ 117.00</u> |
|          | Creditor's Name<br>400 International Way         |                    | When was the debt incurred? 2014-2014                                    |                  |
|          | Number Street                                    |                    |  |                  |
|          |  |                    | As of the date you file the claim is: Check all that apply               |                  |
|          |  |                    | As of the date you file, the claim is: Check all that apply.  Contingent |                  |
|          | Springfield                                      | OR 97477           | ☐ Unliquidated   |                  |
|          | City Vho owes the debt? Check one                | State Zip Code     | Disputed   |                  |
| ľ        | Debtor 1 only                                    | <b>5</b> .         |  |                  |
| Ī        | Debtor 2 only                                    |                    | Type of NONPRIORITY unsecured claim:                                     |                  |
| ř        | Debtor 1 and Debtor 2 only                       |                    | Student loans  |                  |
| ř        | At least one of the debtors an                   | d another          | Obligations arising out of a separation agreement or divorce             |                  |
| Ī        | Check if this claim relates                      |                    | that you did not report as priority claims                               |                  |
|          | community debt                                   |                    | Debts to pension or profit-sharing plans, and other similar debts        |                  |
| ls       | s the claim subject to offest?<br>■              |                    | _  |                  |
|          | No   |                    | Other. Specify Collecting for Creditor                                   |                  |
| 4.10     | Yes Credit ONE BANK NA                           |                    | Last 4 digits of account number NULL                                     | \$ 1,629.00      |
| 1.10     | Creditor's Name                                  |                    |  |                  |
|          | Po Box 98875                                     |                    | When was the debt incurred? 2010-2016                                    |                  |
|          | Number Street                                    |                    |  |                  |
|          |  |                    | As of the date you file, the claim is: Check all that apply.             |                  |
|          | Las Vegas  | NV 89193           | Contingent   |                  |
|          | City   | State Zip Code     | Unliquidated   |                  |
| v        | Who owes the debt? Check one                     |                    | Disputed   |                  |
|          | Debtor 1 only                                    |                    |  |                  |
| Ļ        | Debtor 2 only                                    |                    | Type of NONPRIORITY unsecured claim: □                                   |                  |
| L        | Debtor 1 and Debtor 2 only                       |                    | ☐ Student loans  |                  |

At least one of the debtors and another

Check if this claim relates to a

Is the claim subject to offest?

community debt

No

Yes

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Other. Specify Credit Card or Credit Use

Doc 1 Filed 03/17/17 Entered 03/17/17 13:16:38 Desc Main Case 17-08420 Page 23 of 55 Case Number (if known) **Document** Valma Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** First Horizon HOME LOA \$ 0.00 Last 4 digits of account number \_ Creditor's Name 2003-2008 4000 Horizon Way When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent TX 75063 Irving Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify \_ Yes Merrick BANK NULL \$ 1,561.00 Last 4 digits of account number 4.12 Creditor's Name 2006-2016 Po Box 9201 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Old Bethpage 11804 NY Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Yes Metlife HOME LOAN 4698 \$ 0.00 4.13 Last 4 digits of account number Creditor's Name 2009-2013 4000 Horizon Way When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Irving 75063 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim:

| Valma  L  Document  First Name  Middle Name  Last Name  Part 2:  Your NONPRIORITY Unsecured Claims - Continuation Page  fiter listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.    Onemain Financial   Last 4 digits of account number            | Total Claim                |
|--|----------------------------|
| Your NONPRIORITY Unsecured Claims - Continuation Page  Iter listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.    Onemain Financial   Last 4 digits of account number  | Total Claim                |
| ter listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.    Onemain Financial   Last 4 digits of account number  | Total Claim                |
| Onemain Financial  Last 4 digits of account number  Creditor's Name  | Total Claim                |
| Creditor's Name  |                            |
|  | \$ <u>6,000.00</u>         |
| 0004 Oct will Divid  |                            |
| 6801 Colwell Blvd When was the debt incurred?  |                            |
|  |                            |
| As of the date you file, the claim is: Check all that apply.   |                            |
| Irving TX 75039  |                            |
| City State Zip Code Unliquidated   |                            |
| Who owes the debt? Check one.  |                            |
| Debtor 1 only  |                            |
| Debtor 2 only  Type of NONPRIORITY unsecured claim:  |                            |
| Debtor 1 and Debtor 2 only Student loans   |                            |
| At least one of the debtors and another  Obligations arising out of a separation agreement or divorce  |                            |
| Check if this claim relates to a that you did not report as priority claims  |                            |
| community debt Debts to pension or profit-sharing plans, and other similar debts   |                            |
| Is the claim subject to offest?  |                            |
| No Other. Specify Personal Loan  |                            |
| Yes  Webbank/Fingerhut Last 4 digits of account number NULL  | <b>\$</b> 260.00           |
| 10   | \$ <u>200.00</u>           |
| Creditor's Name 6250 Ridgewood Rd  When was the debt incurred? 2013-2016   |                            |
| Number Street  |                            |
|  |                            |
| As of the date you file, the claim is: Check all that apply.   |                            |
| Saint Cloud MN 56303 Contingent  |                            |
| City State Zin Code Unliquidated   |                            |
| Who owes the debt? Check one.  |                            |
| Debtor 1 only  |                            |
| Debtor 2 only  Type of NONPRIORITY unsecured claim:  |                            |
| Debtor 1 and Debtor 2 only  Student loans  |                            |
| At least one of the debtors and another    Obligations arising out of a separation agreement or divorce  |                            |
| Check if this claim relates to a that you did not report as priority claims  |                            |
| community debt Debts to pension or profit-sharing plans, and other similar debts   |                            |
| Is the claim subject to offest?  |                            |
| No Other. Specify Credit Card or Credit Use  |                            |
| Yes  |                            |
| Part 3: List Others to Be Notified for a Debt That You Already Listed  |                            |
|  |                            |
| Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For  |                            |
| example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the |                            |
| additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.  |                            |
| Springleaf Financial   |                            |
| On which entry in Part 1 or Part 2 list the original creditor?   |                            |
| Name 601 NW Second St.  Line 14 of (Check one): Part 1: Creditors with Prior   | rity Unsecured Claims      |
|  | -                          |
| Number Street Part 2: Creditors with Non-  | ipriority Unsecured Claims |

Evansville

City

IN 47708

State Zip Code

Last 4 digits of account number \_\_\_\_ \_

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Valma Debtor 1

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|                             |  |            | Total claim         |
|-----------------------------|--|------------|---------------------|
|                             |  |            | 0.00                |
| Total claims<br>from Part 1 | 6a. Domestic support obligations   | 6a.        | \$                  |
|                             | 6b. Taxes and Certain other debts you owe the government   | 6b.        | \$0.00              |
|                             | 6c. Claims for death or personal injury while you were intoxicated   | 6c.        | \$0.00              |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.   | 6d.        | \$0.00              |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.   | 6e.        | \$0.00              |
|                             |  |            |                     |
|                             |  |            | Total claim         |
| Total claims                | 6f. Student loans  | 6f.        | Total claim  \$0.00 |
| Total claims<br>from Part 2 | <ul><li>6f. Student loans</li><li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li></ul>  | 6f.<br>6g. | 0.00                |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority   |            | \$0.00              |
|                             | <ul> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other</li> </ul> | 6g.        | \$                  |

|                |                                  | Caso 17             | 7.09420 Doc 1  | Filad 02/17/17  | Entore(                          | l 03/17/17 13 <sup>.</sup> ′                    | 16 <sup>.</sup> 38 D         | esc Main                           |       |
|----------------|----------------------------------|---------------------|--|---|----------------------------------|---|------------------------------|------------------------------------|-------|
| Fil            | ll in this in                    | formation to iden   |  |   |                                  | of 55   |                              |                                    |       |
| De             | ebtor 1                          | Valma               | L  | Cherry  | -                                |   |                              |                                    |       |
| D              | ebtor 2                          | First Name          | Middle Name  | Last Name   |                                  |   |                              |                                    |       |
|                | pouse, if filing)                | First Name          | Middle Name  | Last Name   | -                                |   |                              |                                    |       |
| Uı             | nited States                     | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of                                | <u>ILLINOIS</u>   |                                  |   |                              |                                    |       |
|                | ase Number<br>f known)           |                     |  | (State)   |                                  |   |                              | Check if this is ar amended filing | ו     |
| Off            | icial F                          | orm 106G            |  |   |                                  |   |                              |                                    |       |
| Sch            | nedule                           | G: Execut           | ory Contracts and  | Unexpired Lea   | ases                             |   |                              |                                    | 12/15 |
| 3e as<br>nforr | complete                         | and accurate as     | possible. If two married peopleded, copy the additional page       | le are filing together, bot<br>e, fill it out, number the e | th are equally rentries, and att | esponsible for supplyinch it to this page. On t | ng correct<br>the top of any |                                    |       |
| additi         | ional page                       | s, write your nam   | e and case number (if known)                                       | ).  |                                  |   |                              |                                    |       |
| 1. L           | _                                | -                   | contracts or unexpired leases<br>submit this form to the court wit |   | /ou have nothin                  | a else to report on this f                      | form                         |                                    |       |
| [              | _                                |                     | mation below even if the contra                                    |   |                                  |   |                              |                                    |       |
| _              |                                  |                     | nation bolow even if the contra                                    | oto or rouged are noted in                                  | Concadio 70 B.                   | r roporty (emolar r em                          | 100/112/                     |                                    |       |
|                |                                  |                     | or company with whom you h   |   |                                  |   |                              |                                    |       |
|                | <b>xample, re</b><br>nexpired le |                     | cell phone). See the instructio                                    | ns for this form in the inst                                | truction booklet                 | for more examples of ex                         | kecutory contrac             | cts and                            |       |
|                | Person or                        | company with w      | hom you have the contract or                                       | lease   |                                  | State what the contr                            | act or lease is f            | for                                |       |
| 2.1            | l                                |                     |  |   |                                  |   |                              |                                    |       |
| 2.1            | Name                             |                     |  |   | _                                |   |                              |                                    |       |
|                |                                  |                     |  |   | _                                |   |                              |                                    |       |
|                | Number                           | Street              |  |   |                                  |   |                              |                                    |       |
|                | City                             |                     | State Zip  | Code  |                                  |   |                              |                                    |       |
| 2.2            |                                  |                     |  |   |                                  |   |                              |                                    |       |
|                | Name                             |                     |  |   | _                                |   |                              |                                    |       |
|                | Number                           | Street              |  |   | _                                |   |                              |                                    |       |
|                | City                             |                     | State Ziņ  | Codo  | _                                |   |                              |                                    |       |
| 0.0            | City                             |                     | State Zij  | Code  |                                  |   |                              |                                    |       |
| 2.3            | Name                             |                     |  |   | _                                |   |                              |                                    |       |
|                |                                  |                     |  |   | _                                |   |                              |                                    |       |
|                | Number                           | Street              |  |   |                                  |   |                              |                                    |       |
|                | City                             |                     | State Zip  | o Code  | _                                |   |                              |                                    |       |
| 2.4            |                                  |                     |  |   |                                  |   |                              |                                    |       |
| 2.7            | Name                             |                     |  |   | _                                |   |                              |                                    |       |
|                | Normalian                        | Observat            |  |   | _                                |   |                              |                                    |       |
|                | Number                           | Street              |  |   |                                  |   |                              |                                    |       |
|                | City                             |                     | State Zip  | Code  | _                                |   |                              |                                    |       |
| 2.5            |                                  |                     |  |   | _                                |   |                              |                                    |       |
|                | Name                             |                     |  |   |                                  |   |                              |                                    |       |
|                | Number                           | Street              |  |   | _                                |   |                              |                                    |       |
|                |                                  |                     |  |   |                                  |   |                              |                                    |       |

State Zip Code

City

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| Fill in this information to identify your case: |                      |                                       |           |  |
|---|----------------------|---------------------------------------|-----------|--|
| Debtor 1  | Valma                | L                                     | Cherry    |  |
|   | First Name           | Middle Name                           | Last Name |  |
| Debtor 2  |                      |                                       |           |  |
| (Spouse, if filing)                             | First Name           | Middle Name                           | Last Name |  |
| United States                                   | Bankruptcy Court for | r the : <u>NORTHERN</u> District of _ |           |  |
| Case Number                                     | r                    |                                       | (State)   |  |
| (If known)                                      |                      |                                       |           |  |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A       | dditional Pages, write your name ar   | nd case number (if known). Answ          | er every question.   |   |
|-------------|---|--|----------------------|---|
| 1. <b>D</b> | o you have any codebtors? (If you a   | re filing a joint case, do not list eith | ner spouse as a code | btor.)  |
|             | No.   |  |                      |   |
|             | Yes   |  |                      |   |
|             | lithin the last 8 years, have you liverizona, California, Idaho, Lousiiana, N |  | • ,                  | unity property states and territories include and Wisconsin.) |
|             | No. Go to line 3.   |  |                      |   |
|             | Yes. Did your spouse, former spo  | use, or legal equivalent live with yo    | ou at the time?      |   |
|             |   | e or territory did you live?             | Fill ir              | n the name and current address of that person.                |
|             | Name of your spouse, former spouse or   | legal equivalent                         |                      |   |
|             |   |  |                      |   |
|             | Number Street   |  |                      |   |
|             | City  | State                                    | Zip Code             |   |
| 3           | chedule E/F, or Schedule G to fill ou   | it Column 2.                             |                      | Column 2: The creditor to whom you owe the debt               |
|             |   |  |                      | Check all schedules that apply:                               |
| 3.1         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |
| 3.2         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
| _           | City  | State                                    | Zip Code             |   |
| 3.3         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |

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|  | Case 17-08420   | 0 Doc 1   | Filed 03/17/17  |   | 3/17/17 13:16:38<br>55                                    | Desc Main  |
|--|---|---|---|---|---|--|
| Fill in this i                                     | nformation to identify you  | r case:   |   |   |   |  |
| Debtor 1   | Valma<br>First Name   | L<br>Middle Name                                | Cherry<br>Last Name                                       | _   |   |  |
| Debtor 2<br>(Spouse, if filing)                    | First Name  | Middle Name                                     | Last Name   | _   |   |  |
| Case Numbe<br>(If known)                           | s Bankruptcy Court for the :!   |   |   |   |   | g<br>owing post-petition<br>e as of the following date:<br>— |
| Schedu   | le I: Your Inco   | me  |   |   |   | 12/15  |
| supplying corr<br>f you are sepa<br>separate sheet | e and accurate as possible.  ect information. If you are n  rated and your spouse is no  to this form. On the top of  Describe Employment | narried and not filion<br>ot filing with you, o | ng jointly, and your spouse<br>to not include information | e is living with you, i<br>about your spouse. | nclude information about y<br>If more space is needed, at | our spouse.  |
| Fill in you informati                              | ur employment<br>on   |   | Debtor  | 1   | Debte   | or 2 or non-filing spouse                                    |
| attach a   | ve more than one job,<br>separate page with<br>on about additional<br>rs.   | Employment stat                                 | us 🖳  | ployed<br>employed                            | Emplo   | oyed<br>mployed  |

Include part-time, seasonal, or self-employed work. Occupation Retired Occupation may Include student or homemaker, if it applies. **Employers name Employers address** How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary and commissions (before all payroll \$0.00 \$0.00 deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. \$0.00 \$0.00 Calculate gross income. Add line 2 + line 3. \$0.00 \$0.00

 Official Form 106I
 Record # 724009
 Schedule I: Your Income
 Page 1 of 2

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Valma Debtor 1 First Name Middle Name Last Name Page 29 of 55 Case Number (if known)

|               |                        |   |              | For Debtor 1             |           | Debtor 2 or<br>filing spouse |     |                     |
|---------------|------------------------|---|--------------|--------------------------|-----------|------------------------------|-----|---------------------|
|               | Copy                   | y line 4 here   | 4.           | \$0.00                   |           | \$0.00                       |     |                     |
| 5. <b>L</b>   | ist all                | payroll deductions:   |              |                          |           |                              |     |                     |
|               | 5a. <b>T</b>           | ax, Medicare, and Social Security deductions  | 5a.          | \$270.37                 |           | \$0.00                       |     |                     |
|               | 5b. <b>N</b>           | Mandatory contributions for retirement plans  | 5b.          | \$0.00                   |           | \$0.00                       |     |                     |
|               | 5c. <b>V</b>           | oluntary contributions for retirement plans   | 5c.          | \$0.00                   |           | \$0.00                       |     |                     |
|               | 5d. <b>F</b>           | Required repayments of retirement fund loans  | 5d.          | \$0.00                   |           | \$0.00                       |     |                     |
|               | 5e. lı                 | nsurance  | 5e.          | \$127.27                 |           | \$0.00                       |     |                     |
|               | 5f. <b>C</b>           | Domestic support obligations  | 5f.          | \$0.00                   |           | \$0.00                       |     |                     |
|               | 5g. <b>L</b>           | Jnion dues  | 5g.          | \$0.00                   |           | \$0.00                       |     |                     |
|               | 5h. <b>C</b>           | Other deductions. Specify:  | 5h.          | \$0.00                   |           | \$0.00                       |     |                     |
| 6. <b>A</b>   | dd the                 | <b>payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.  | 6.           | \$397.64                 |           | \$0.00                       |     |                     |
| 7. <b>C</b>   | alcula                 | te total monthly take-home pay. Subtract line 6 from line 4.  | 7.           | -\$397.64                |           | \$0.00                       |     |                     |
| 8. <b>L</b> i | st all                 | other income regularly received:  |              | _                        |           |                              |     |                     |
|               | 8a.                    | Net income from rental property and from operating a business,  |              |                          |           |                              |     |                     |
|               |                        | profession, or farm   |              |                          |           |                              |     |                     |
|               |                        | Attach a statement for each property and business showing gross   |              |                          |           |                              |     |                     |
|               |                        | receipts, ordinary and necessary business expenses, and the total   |              |                          |           |                              |     |                     |
|               |                        | monthly net income.   | 8a.<br>—     | \$0.00                   |           | \$0.00                       |     |                     |
|               | 8b.                    | Interest and dividends  | 8b.          | \$0.00                   |           | \$0.00                       |     |                     |
|               | 8c.                    | Family support payments that you, a non-filing spouse, or a   | 8c.          | \$ 0.00                  |           | \$ 0.00                      |     |                     |
|               |                        | dependent regularly receive   |              |                          |           |                              |     |                     |
|               |                        | Include alimony, spousal support, child support, maintenance, divorce   |              |                          |           |                              |     |                     |
|               |                        | settlement, and property settlement.  |              |                          |           |                              |     |                     |
|               | 8d.                    | Unemployment compensation   | 8d.<br>      | \$0.00                   |           | \$0.00                       |     |                     |
|               | 8e.                    | Social Security   | 8e.<br>      | \$0.00                   |           | \$0.00                       |     |                     |
|               | 8f.                    | Other government assistance that you regularly receive  | 8f.          | \$0.00                   |           | \$0.00                       |     |                     |
|               |                        | Include cash assistance and the value (if known) of any non-cash  |              |                          |           |                              |     |                     |
|               |                        | assistance that you receive, such as food stamps (benefits under the  |              |                          |           |                              |     |                     |
|               |                        | Supplemental Nutrition Assistance Program) or housing subsidies.  |              |                          |           |                              |     |                     |
|               | 0                      | Specify:  | •            | *******                  |           |                              |     |                     |
|               | 8g.                    | Pension or retirement income  | 8g.<br>—     | \$3,358.09               |           | \$0.00                       |     |                     |
|               | 8h.                    | Other monthly income. Specify:  | 8h.<br>—     | \$0.00                   |           | \$0.00                       |     |                     |
| 9.            | Add                    | <b>all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9            | \$3,358.09               |           | \$0.00                       |     |                     |
| 10.           | Calc                   | ulate monthly income. Add line 7 + line 9.  | 10.          | \$2,960.45               |           | \$0.00                       | . Г | \$2,960.45          |
|               | Add                    | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |              | Ψ2,000.40                | L         | ψ0.00                        | L   | Ψ2,300.43           |
| 11.           | Inclu<br>other<br>Do n | e all other regular contributions to the expenses that you list in Schedul de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are sify: | our dependen | •                        |           | ıle J.                       | 11  | \$0.00              |
| 12.           |                        | the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of C  |              | •                        | t annlies |                              | 12. | \$2,960.45          |
| 13.           |                        | ou expect an increase or decrease within the year after you file this forr  |              | o ana Relateu Data, II l | , applies |                              | L   | <del></del> ,000.40 |
| 10.           | X I                    |   |              |                          |           |                              |     |                     |

| Fill in this in                 | formation to identify yo                         | ur case:                  |  |  |                                      |                      |
|---------------------------------|--|---------------------------|--|--|--------------------------------------|----------------------|
| Debtor 1                        | Valma  | L                         | Cherry   | Check if this is:  |                                      |                      |
|                                 | First Name                                       | Middle Name               | Last Name  | An amende  | •                                    |                      |
| Debtor 2<br>(Spouse, if filing) | First Name                                       | Middle Name               | Last Name  |  | ent showing post of the following of | -petition chapter 13 |
| United States                   | Bankruptcy Court for the : _                     | NORTHERN DISTRICT         | OF ILLINOIS  |  |                                      |                      |
| Case Number<br>(If known)       |  |                           |  | MM / DD /  | YYYY                                 |                      |
| Official E                      | orm 106J   |                           |  |  | _                                    | 2 because Debtor 2   |
|                                 |  |                           |  | — maintains  | a separate house                     | hold.                |
|                                 | e J: Your Exp                                    |                           |  |  |                                      | 12/14                |
|                                 | -  |                           |  | are equally responsible for supply ages, write your name and case nur      | _                                    |                      |
| Part 1:                         | escribe Your Household                           |                           |  |  |                                      |                      |
| 1. Is this a joi                | nt case?   |                           |  |  |                                      |                      |
|                                 | Go to line 2.                                    |                           |  |  |                                      |                      |
| Yes. I                          | Does Debtor 2 live in a s                        | eparate household?        |  |  |                                      |                      |
|                                 |  | t file a separate Sched   | ule J.   |  |                                      |                      |
| 2. Do you h                     | nave dependents?                                 | X No                      |  | Dependent's relationship to  | Dependent's                          | Does dependent live  |
|                                 | st Debtor 1 and                                  | Yes. Fill o               | ut this information for                                    | Debtor 1 or Debtor 2   | age                                  | with you?            |
| Debtor 2                        |  | each depe                 | ndent  |  |                                      | X No                 |
| Do not st names.                | ate the dependents'                              |                           |  |  |                                      | Yes X No             |
|                                 |  |                           |  |  |                                      | Yes                  |
|                                 |  |                           |  |  |                                      | X No                 |
|                                 |  |                           |  |  |                                      | Yes                  |
|                                 |  |                           |  |  |                                      | X No                 |
|                                 |  |                           |  |  |                                      | Yes                  |
|                                 |  |                           |  |  |                                      | X No                 |
|                                 |  |                           |  |  |                                      | Yes                  |
| -                               | expenses include<br>s of people other than       | X No                      |  |  |                                      |                      |
|                                 | and your dependents?                             | Yes                       |  |  |                                      |                      |
| Part 2:                         | stimate Your Ongoing Mo                          | onthly Expenses           |  |  |                                      |                      |
| _                               | -  |                           |  | m as a supplement in a Chapter 13<br>, check the box at the top of the for | -                                    |                      |
| the applicable                  |  | picy is filed. If this is | a supplemental schedule s                                  | , check the box at the top of the for                                      | ili alia ilii ili                    |                      |
|                                 | -  | =                         | tance if you know the value<br>r Income (Official Form 106 |  | ,                                    | our expenses         |
|                                 |  |                           | ·  |  |                                      |                      |
|                                 | al or home ownership e<br>for the ground or lot. | xpenses for your resi     | dence. Include first mortgag                               | e payments and   | 4.                                   | \$1,425.00           |
|                                 | cluded in line 4:                                |                           |  |  |                                      | . ,                  |
| 4a. Re                          | al estate taxes                                  |                           |  |  | 4a.                                  | \$0.00               |
| 4b. Pro                         | operty, homeowner's, or                          | renter's insurance        |  |  | 4b.                                  | \$0.00               |
| 4c. Ho                          | me maintenance, repair,                          | and upkeep expenses       | :  |  | 4c.                                  | \$25.00              |
| 4d. Ho                          | meowner's association o                          | r condominium dues        |  |  | 4d.                                  | \$0.00               |

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Document Cherry Page 31 of 55 Valma Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name Your expenses

|  |      | Tour expens | ) <del>U</del> S |
|--|------|-------------|------------------|
| <ol> <li>Additional Mortgage payments for your residence, such as home equity loans</li> </ol>                         | 5.   |             | \$0.00           |
| 6. Utilities:  |      |             |                  |
| 6a. Electricity, heat, natural gas   | 6a.  |             | \$350.00         |
| 6b. Water, sewer, garbage collection   | 6b.  |             | \$200.00         |
| 6c. Telephone, cell phone, internet, satellite, and cable service  | 6c.  |             | \$188.00         |
| 6d. Other. Specify:  | 6d.  | \$          | 0.00             |
| 7. Food and housekeeping supplies  | 7.   |             | \$500.00         |
| 8. Childcare and children's education costs  | 8.   |             | \$0.00           |
| 9. Clothing, laundry, and dry cleaning   | 9.   |             | \$90.00          |
| 10. Personal care products and services  | 10.  |             | \$50.00          |
| 11. Medical and dental expenses  | 11.  |             | \$20.00          |
| <ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ol> | 12.  |             | \$120.00         |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books   | 13.  |             | \$50.00          |
| 14. Charitable contributions and religious donations   | 14.  |             | \$0.00           |
| 15. Insurance.   |      |             |                  |
| Do not include insurance deducted from your pay or included in lines 4 or 20.  |      |             |                  |
| 15a. Life insurance  | 15a. |             | \$0.00           |
| 15b. Health insurance  | 15b. |             | \$0.00           |
| 15c. Vehicle insurance   | 15c. |             | \$0.00           |
| 15d. Other insurance. Specify:   | 15d. |             | \$0.00           |
| 16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.                            |      |             |                  |
| Specify: Federal or State Tax Repayments   | 16.  |             | \$275.00         |
| 17. Installment or lease payments:   |      |             |                  |
| 17a. Car payments for Vehicle 1  | 17a. |             | \$0.00           |
| 17b. Car payments for Vehicle 2  | 17b. |             | \$0.00           |
| 17c. Other. Specify:   | 17c. |             | \$0.00           |
| 17d. Other. Specify:   | 17d. |             | \$0.00           |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted                             |      |             |                  |
| from your pay on line 5, Schedule I, Your Income (Official Form 106I).   | 18.  |             | \$0.00           |
| 19. Other payments you make to support others who do not live with you.  |      |             |                  |
| Specify:   | 19.  |             | \$0.00           |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.              |      |             |                  |
| 20a. Mortgages on other property   | 20a. |             | \$ 0.00          |
| 20b. Real estate taxes   | 20b. | \$          | 0.00             |
| 20c. Property, homeowner's, or renter's insurance  | 20c. | \$          | 0.00             |
|  | 20d. | \$          | 0.00             |
| 20d. Maintenance, repair, and upkeep expenses  |      |             |                  |

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Valma Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name \$68.00 21. Other. Specify: Pet Care (\$40.00), Postage/Bank Fees (\$5.00), Whole (\$23.00), 21. \$3,361.00 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$2,960.45 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$3,361.00 23b. Copy your monthly expenses from line 22 above. 23b.--\$400.55 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 724009 Schedule J: Your Expenses Page 3 of 3

| Fill in this in           | formation to iden    | tify your case:                     |                              |
|---------------------------|----------------------|-------------------------------------|------------------------------|
| Debtor 1                  | Valma                | L                                   | Cherry                       |
|                           | First Name           | Middle Name                         | Last Name                    |
| Debtor 2                  |                      |                                     |                              |
| (Spouse, if filing)       | First Name           | Middle Name                         | Last Name                    |
| United States             | Bankruptcy Court for | r the : <u>NORTHERN</u> District of | _ <u>ILLINOIS</u><br>(State) |
| Case Number<br>(If known) | -                    |                                     | _                            |

# Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |
|---|---|
| Did you pay or agree to pay someone who is NOT ar | n attorney to help you fill out bankruptcy forms?   |
| No  |   |
| Yes. Name of Person                               | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|   |   |
|   |   |
|   |   |
|   | ne summary and schedules filed with this declaration and that they are true and               |
| correct.  |   |
| ✗ /s/ Valma L Cherry                              | <b>x</b>  |
| Signature of Debtor 1                             | Signature of Debtor 2   |
| Date 03/16/2017                                   | Date  |
| MM / DD / YYYY                                    | MM / DD / YYYY  |
|   |   |

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|                           |                        |                                  | ocument ra                | $JC \cup T \cup T$ |
|---------------------------|------------------------|----------------------------------|---------------------------|--------------------|
| Fill in this in           | nformation to identi   | fy your case:                    |                           |                    |
| Debtor 1                  | Valma                  | L                                | Cherry                    |                    |
|                           | First Name             | Middle Name                      | Last Name                 |                    |
| Debtor 2                  |                        | ·                                |                           |                    |
| (Spouse, if filing)       | First Name             | Middle Name                      | Last Name                 |                    |
| United States             | Bankruptcy Court for t | he : <u>NORTHERN</u> District of | _ <u>ILLINOIS</u> (State) |                    |
| Case Number<br>(If known) | r                      |                                  |                           |                    |
|                           |                        |                                  |                           |                    |

# Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

| ntormation. It more space is needed, attach a separat number (if known). Answer every question.  Part 1:  Give Details About Your Marital Status and  |   |  | ,                    |                                    |
|---|---|--|----------------------|------------------------------------|
| 01. What is your current marital status?  |   |  |                      |                                    |
| -<br>Morried  |   |  |                      |                                    |
| Married   |   |  |                      |                                    |
| Not married   |   |  |                      |                                    |
| 02 During the last 3 years, have you lived anywhere   | other than where you live                               | now?   |                      |                                    |
| No.   |   |  |                      |                                    |
| Yes. List all of the places you lived in the last 3   | years. Do not include whe                               | ere you live now.  |                      |                                    |
| Debtor 1  | Dates Debtor  | 1 Debtor 2:  |                      | Dates Debtor 2                     |
|   | lived there   |  |                      | lived there                        |
| Yes. Make sure you fill out Schedule H: Your C  Part 2: Explain the Sources of Your Income  O4 Did you have any income from employment or fr Fill in the total amount of income you received from If you are filing a joint case and you have income the No.  No.  Yes. Fill in the details | om operating a business<br>n all jobs and all businesse | during this year or the two pr<br>s, including part-time activities. |                      |                                    |
| Tes. I ill ill the details  | Debtor 1  |  | Debtor 2             |                                    |
|   | Sources of income                                       | Gross income   | Sources of income    | Gross income                       |
|   | Check all that apply                                    | (before deductions and exclusions)                                   | Check all that apply | (before deductions and exclusions) |
|   |   |  |                      |                                    |

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| Debtor 1   | Valma  | 1                          | Cherry  | r age se er se  | se Number (if known)                 |   |  |  |  |  |
|--|--|----------------------------|---|---|--------------------------------------|---|--|--|--|--|
| DCDIOI I   | First Name   | Middle Name                | Last Name   |   | se Number (ii known)                 |   |  |  |  |  |
| 05 -   |  |                            |   |   |                                      |   |  |  |  |  |
| In<br>ar   | d you receive any other income during this year or the two previous calendar years?  Clude income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, d other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery nnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. |                            |   |   |                                      |   |  |  |  |  |
| Li   | st each source and the   | gross income from eac      | h source separately. Do not                                     | include income that you liste   | d in line 4.                         |   |  |  |  |  |
|  | No.  |                            |   |   |                                      |   |  |  |  |  |
|  | Yes. Fill in the details   | 3                          |   |   |                                      |   |  |  |  |  |
|  |  |                            | Debtor 1  |   | Debtor 2                             |   |  |  |  |  |
|  |  |                            | Sources of income<br>Describe below.                            | Gross income<br>(before deductions and<br>exclusions)   | Sources of income<br>Describe below. | Gross income<br>(before deductions and<br>exclusions) |  |  |  |  |
|  | From January 1 of o  | current year until         | Pension   | \$10,075  |                                      |   |  |  |  |  |
|  | the date you filed fo  | r bankruptcy:              |   |   |                                      |   |  |  |  |  |
|  | ·  |                            |   |   |                                      |   |  |  |  |  |
|  | For last calendar ye   | ar:                        | Pension   | \$39,124  |                                      |   |  |  |  |  |
|  | (January 1 to Decer  | nber 31, 2016)             |   |   |                                      |   |  |  |  |  |
| _  | For last calendar ye   | ar:                        | Pension   | \$37,984  |                                      |   |  |  |  |  |
|  | (January 1 to Decer  | nber 31, 2015)             | Babysitting   | \$1,201   |                                      |   |  |  |  |  |
| Part   | List Certain Pay   | ments You Made Before      | You Filed for Bankruptcy  |   |                                      |   |  |  |  |  |
| 06 A   | re either Debtor 1's o   | Debtor 2's debts prima     | arily consumer debts?   |   |                                      |   |  |  |  |  |
| Г  | No. <b>Neither Debtor</b>  | 1 nor Debtor 2 has prir    | marily consumer debts. Co                                       | nsumer debts are defined in   | 11 U.S.C. § 101(8) as                |   |  |  |  |  |
| _  | "incurred by an  | individual primarily for a | a personal, family, or househ                                   | old purpose."   |                                      |   |  |  |  |  |
|  | During the 90 d  | ays before you filed for   | bankruptcy, did you pay any                                     | creditor a total of \$6,225* or   | more?                                |   |  |  |  |  |
|  | ☐ No. Go to I  | ine 7.                     |   |   |                                      |   |  |  |  |  |
|  | total amou   | nt you paid that creditor. | Do not include payments fo                                      | 25* or more in one or more pa<br>or domestic support obligation<br>attorney for this bankruptcy | ns, such as                          |   |  |  |  |  |
|  | * Subject to adjustm   | ent on 4/01/16 and ever    | ry 3 years after that for case                                  | s filed on or after the date of   | adjustment.                          |   |  |  |  |  |
| Yes. <b>Debtor 1 or Debtor 2 or both have primarily consumer debts.</b> During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? |  |                            |   |   |                                      |   |  |  |  |  |
|  | No. Go to I  |                            |   |   |                                      |   |  |  |  |  |
|  | Yes. List be   | elow each creditor to wh   | nom you paid a total of \$600                                   | or more and the total amoun   | t you paid that                      |   |  |  |  |  |
|  |  |                            | for domestic support obligati<br>ents to an attorney for this b | ons, such as child support ar<br>pankruptcy case.   | nd                                   |   |  |  |  |  |
|  |  |                            | Dates of payments   | Total amount paid   | Amount you still owe                 | Was this payment for                                  |  |  |  |  |
|  |  |                            | payments  |   |                                      |   |  |  |  |  |

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| ebtor | 1   | Valma  | <u>L</u>                 | Cherry                   |                       | Case Number (if kr      | nown)             |                                  |  |
|-------|---|--|--------------------------|--------------------------|-----------------------|-------------------------|-------------------|----------------------------------|--|
|       |   | First Name   | Middle Name              | Last Name                |                       |                         |                   |                                  |  |
| <br>  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  nsiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |  |                          |                          |                       |                         |                   |                                  |  |
| _     |   | No.  |                          |                          |                       |                         |                   |                                  |  |
|       | П,  | Yes. List all payments   | to an insider.           |                          |                       |                         |                   |                                  |  |
|       |   |  |                          | Dates of payment         | Total amount paid     | Amount you still<br>owe | Reason            | for this payment                 |  |
|       |   |  |                          | payment                  | pulu                  | Oiic                    |                   |                                  |  |
| ar    | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.   |  |                          |                          |                       |                         |                   |                                  |  |
|       | 1   | No.  |                          |                          |                       |                         |                   |                                  |  |
|       |   | Yes. List all payments   | to an insider.           |                          |                       |                         |                   |                                  |  |
|       |   |  |                          | Dates of                 | Total amount          | Amount you still        |                   | for this payment creditor's name |  |
|       |   |  |                          | payment                  | paid                  | owe                     | include           | creditor's name                  |  |
| Pa    | rt 4:   | Identify Legal act   | ions, Repossessions, and | d Foreclosures           |                       |                         |                   |                                  |  |
| 1     | List<br>mod   | Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?  List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.  No.  Yes. Fill in the details. |                          |                          |                       |                         |                   |                                  |  |
|       | Ц   | res. Fill III the details.   |                          | Nature of the case       | Court                 | or agency               |                   | Status of the case               |  |
|       | Che   | nin 1 year before you f<br>ck all that apply and fi<br>No. Go to line 11<br>Yes. Fill in the informa   |                          | any of your property rep | ossessed, foreclosed, | garnished, attached, s  | seized, or levied | ?                                |  |
|       |   |  | adon bolow.              |                          |                       |                         |                   |                                  |  |
|       |   |  |                          | Describe the prope       | erty                  |                         | Date              | Value of the property            |  |
|       |   | Crysler Captial  |                          | 2016 Dodge Charg         | er                    |                         | 11/2016           | Secured by PMSI                  |  |
|       |   |  |                          |                          |                       |                         |                   | loan in excess of<br>vlaue       |  |
|       |   | Explain what happened  |                          |                          |                       |                         |                   |                                  |  |
|       |   | Property was repossessed.  |                          |                          |                       |                         |                   |                                  |  |
|       |   |  |                          | Property was f           | oreclosed.            |                         |                   |                                  |  |
|       |   |  |                          | Property was o           | garnished.            |                         |                   |                                  |  |
|       |   | Property was attached, seized, or levied.  |                          |                          |                       |                         |                   |                                  |  |
|       |   |  |                          |                          |                       |                         |                   |                                  |  |
|       |   |  |                          |                          |                       |                         |                   |                                  |  |
|       |   | Vithin 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts  |                          |                          |                       |                         |                   |                                  |  |
| _     | or refuse to make a payment because you owed a debt?  |  |                          |                          |                       |                         |                   |                                  |  |
|       | No. Go to line 11   |  |                          |                          |                       |                         |                   |                                  |  |
|       |   | Yes. Fill in the informa   |                          |                          |                       |                         |                   |                                  |  |
|       | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a  |  |                          |                          |                       |                         |                   |                                  |  |
|       | court-appointed receiver, a custodian, or another official?  No.  |  |                          |                          |                       |                         |                   |                                  |  |
|       | ٦<br>۲  |  |                          |                          |                       |                         |                   |                                  |  |
|       |   |  |                          |                          |                       |                         |                   |                                  |  |
|       | 1 5:  |  | and Contributions        | !:d                      | :4h - 4-4-1           | 4b \$000                | 2                 |                                  |  |
| 13    |   | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?   |                          |                          |                       |                         |                   |                                  |  |
|       | No.   |  |                          |                          |                       |                         |                   |                                  |  |
|       | П,  | Yes. Fill in the details   | for each gift.           |                          |                       |                         |                   |                                  |  |
|       |   |  |                          |                          |                       |                         |                   |                                  |  |
|       |   |  |                          |                          |                       |                         |                   |                                  |  |

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| Debto | r 1    | Valma                             | L                      | Cherry                             | Case Number (if kr.                   | own)                |                   |
|-------|--------|-----------------------------------|------------------------|------------------------------------|---------------------------------------|---------------------|-------------------|
|       |        | First Name                        | Middle Name            | Last Name                          |                                       |                     |                   |
| 14    | With   | nin 2 vears before vou filed fo   | or bankruptcy, did v   | ou give any gifts or contribution  | s with a total value of more th       | an \$600 to anv ch  | arity?            |
|       | _      | -                                 |                        |                                    |                                       |                     |                   |
|       | 1      |                                   |                        |                                    |                                       |                     |                   |
|       | П,     | Yes. Fill in the details for each | n gift.                |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
| P     | art 6: | List Certain Losses               |                        |                                    |                                       |                     |                   |
| 15    | With   | nin 1 year hefore you filed fo    | r hankruntev or sine   | e you filed for bankruptcy, did y  | ou lose anything because of t         | haft fire other dis | easter or         |
|       |        | bling?                            | i bullkruptcy of silic | e you med for bullkruptey, ald y   | ou lose unything because of t         | nert, me, other die | suster, or        |
|       | _      | No.                               |                        |                                    |                                       |                     |                   |
|       | _      |                                   | :£                     |                                    |                                       |                     |                   |
|       | Ш      | Yes. Fill in the details for each | ı giit.                |                                    |                                       |                     |                   |
|       |        |                                   | _                      |                                    |                                       |                     |                   |
| P     | art 7: | List Certain Payments or          | Transfers              |                                    |                                       |                     |                   |
| 16    | With   | nin 1 year before you filed for   | r bankruptcy, did yo   | u or anyone else acting on your    | behalf pay or transfer any pro        | perty to anyone y   | ou                |
|       |        | sulted about seeking bankru       |                        |                                    | .,                                    | . , , ,             |                   |
|       | Inclu  | ude any attorneys, bankrupto      | cy petition preparers  | s, or credit counseling agencies   | for services required in your l       | oankruptcy.         |                   |
|       | □ ¹    | No.                               |                        |                                    |                                       |                     |                   |
|       | =      | Yes. Fill in the details          |                        |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
|       | F      | Party Contact Info                |                        | Description and value of any p     | roperty transferred                   | Date payment        | Amount of payment |
|       |        |                                   |                        |                                    |                                       | or transfer         |                   |
|       |        | Geraci Law L.L.C.                 |                        |                                    |                                       |                     | \$1,600.00        |
|       |        | 55 E. Monroe Street #3400         |                        |                                    |                                       |                     |                   |
|       |        | Chicago,IL 60603                  |                        |                                    |                                       |                     |                   |
|       |        | Criicago,il 00003                 |                        |                                    |                                       |                     |                   |
|       |        |                                   | <del></del>            |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
|       | F      | Party Contact Info                |                        | Description and value of any p     | roperty transferred                   | Date payment        | Amount of payment |
|       |        |                                   |                        |                                    |                                       | or transfer         |                   |
|       |        | Hananwill Credit Counseling       | 1                      | Credit Counseling Services         |                                       | 2016                | \$25.00           |
|       |        | 115 N. Cross St.                  |                        |                                    |                                       |                     |                   |
|       |        | Robinson, IL 62454                |                        |                                    |                                       |                     |                   |
|       |        | Trobindon, 12 02 10 1             |                        |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
| 17    | With   | nin 1 year hefore you filed fo    | r hankruntey did vo    | u or anyone else acting on your    | hehalf nay or transfer any nro        | nerty to anyone w   | vho               |
|       |        |                                   |                        | nake payments to your creditors    |                                       | perty to unyone v   | ·····o            |
|       | Do r   | not include any payment or t      | ransfer that you liste | ed on line 16.                     |                                       |                     |                   |
|       |        | No.                               |                        |                                    |                                       |                     |                   |
|       |        | Yes. Fill in the details.         |                        |                                    |                                       |                     |                   |
|       | ш      | roo. I ili ili tilo dotallo.      |                        |                                    |                                       |                     |                   |
| 18    | With   | nin 2 vears before vou filed fo   | or bankruptcy, did v   | ou sell, trade, or otherwise trans | sfer any property to anyone, o        | ther than property  | i                 |
|       |        | sferred in the ordinary cours     |                        |                                    | , , , , , , , , , , , , , , , , , , , |                     |                   |
|       |        | <del>-</del>                      |                        | s security (such as the granting   | of a security interest or mort        | gage on your prop   | erty).            |
|       | Do r   | not include gifts and transfer    | rs that you have alre  | ady listed on this statement.      |                                       |                     |                   |
|       | 1      | No.                               |                        |                                    |                                       |                     |                   |
|       |        | Yes. Fill in the details for each | n gift.                |                                    |                                       |                     |                   |
|       | _      |                                   |                        |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |
|       |        |                                   |                        |                                    |                                       |                     |                   |

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| Debtor 1  | Valma  | L   | Cherry   | Case                          | Number (if known)                                    |   |  |  |  |
|-----------|--|---|--|-------------------------------|--|---|--|--|--|
|           | First Name   | Middle Name                                       | Last Name  |                               |  |   |  |  |  |
|           | -  | e you filed for bankru<br>re often called asset-p | otcy, did you transfer any property protection devices.) | to a self-settled trust or    | similar device of which                              | ı you are a                             |  |  |  |
|           | No.  |   |  |                               |  |   |  |  |  |
|           | Yes. Fill in the deta  | ails for each gift.                               |  |                               |  |   |  |  |  |
| Part      | 8: List Certain Fi   | inancial Accounts, Insti                          | ruments, Safe Deposit Boxes, and St                      | orage Units                   |  |   |  |  |  |
| so<br>Inc | sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.   |   |  |                               |  |   |  |  |  |
| _         | No.  |   |  |                               |  |   |  |  |  |
|           | Yes. Fill in the deta  | ails.   |  |                               |  |   |  |  |  |
|           |  |   | Last 4 digits of account number                          | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |  |  |  |
|           | o you now have, or our of the state of the s | -   | year before you filed for bankrupto                      | cy, any safe deposit box      | or other depository for                              | securities,                             |  |  |  |
|           | No. Yes. Fill in the deta  | ails.   |  |                               |  |   |  |  |  |
| _         | •  |   | Who else had access to it?                               | Describe the cont             | ents   | Do you still have it?                   |  |  |  |
| 22 Ha     | ave you stored prop  | erty in a storage unit                            | or place other than your home with                       | hin 1 year before you file    | d for bankruptcy?                                    |   |  |  |  |
|           | No.  |   |  |                               |  |   |  |  |  |
| _         | Yes. Fill in the deta  | aile  |  |                               |  |   |  |  |  |
| L         | res. Fill III the deta   | ali5.   | Who else has or had access to it?                        | Describe the cont             | ante   | Do you still                            |  |  |  |
|           |  |   | Who else has or had access to it:                        | Describe the cont             | ionio  | have it?                                |  |  |  |
| Part      | o Identify Prope   | erty You Hold or Control                          | for Someone Else   |                               |  |   |  |  |  |
|           |  |   |  |                               |  |   |  |  |  |
|           | o you hold or contro<br>r someone.   | ol any property that so                           | meone else owns? Include any pr                          | operty you borrowed fro       | m, are storing for, or he                            | old in trust                            |  |  |  |
| _         | 1 No.  |   |  |                               |  |   |  |  |  |
| <u> </u>  |  | -:1-  |  |                               |  |   |  |  |  |
|           | Yes. Fill in the deta  | alls.   | Where is the manufus?                                    | Describe the prompt           | · · · · · · · ·                                      | Value                                   |  |  |  |
|           |  |   | Where is the property?                                   | Describe the prop             | perty  | Value                                   |  |  |  |
|           | 0  |   | Henry  | Direct Express S              | Social Security                                      | l laka suus                             |  |  |  |
|           | Son  |   | Home   | — Debit Card for so           | on with disability                                   | Unknown                                 |  |  |  |
|           |  |   |  | _                             |  |   |  |  |  |
|           |  |   |  | _                             |  |   |  |  |  |
|           |  |   |  | _                             |  |   |  |  |  |
|           | Observa  |   | 0  | Checking Accou                | nt listed as   | Ualia anna                              |  |  |  |
|           | Chase  |   | Son  | beneficiary for S             | ocial Security                                       | Unknown                                 |  |  |  |
|           |  |   |  | Disability Benefi             | ts   |   |  |  |  |
|           |  |   |  | _                             |  |   |  |  |  |
|           |  |   |  | _                             |  |   |  |  |  |
|           |  |   |  |                               |  |   |  |  |  |
|           |  |   |  |                               |  |   |  |  |  |
|           |  |   |  |                               |  |   |  |  |  |
|           |  |   |  |                               |  |   |  |  |  |
|           |  |   |  |                               |  |   |  |  |  |
|           |  |   |  |                               |  |   |  |  |  |
|           |  |   |  |                               |  |   |  |  |  |
|           |  |   |  |                               |  |   |  |  |  |
|           |  |   |  |                               |  |   |  |  |  |
|           |  |   |  |                               |  |   |  |  |  |

| ebtor 1      | Case 17-0   | D8420 D00               | : 1 Filed 03/17/17 Document Cherry Last Name | Entered 03/17/17 13:16:38<br>Page 39 of 55<br>Case Number (if known) | Desc Main          |  |  |  |  |  |
|--------------|---|-------------------------|--|--|--------------------|--|--|--|--|--|
|              | THE TRAINS  | made raile              | Lacertaino                                   |  |                    |  |  |  |  |  |
| Part 1       | Give Details Abou   | ıt Environmental Info   | rmation                                      |  |                    |  |  |  |  |  |
| For the      | purpose of Part 10, th  | e following definition  | ons apply:                                   |  |                    |  |  |  |  |  |
| haz          | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. |                         |  |  |                    |  |  |  |  |  |
|              | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  |                         |  |  |                    |  |  |  |  |  |
|              | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.   |                         |  |  |                    |  |  |  |  |  |
| Report       | all notices, releases, a  | and proceedings tha     | at you know about, regardless o              | of when they occurred.   |                    |  |  |  |  |  |
|              | s any governmental un<br>No.<br>Yes. Fill in the details.   | nit notified you that   | you may be liable or potentially             | y liable under or in violation of an environmental                   | law?               |  |  |  |  |  |
|              |   |                         | Governmental unit                            | Environmental law, if you know it                                    | Date of notice     |  |  |  |  |  |
| 25 <b>Ha</b> | ve you notified any go No. Yes. Fill in the details.  | vernmental unit of a    | any release of hazardous mater               | ial?  Environmental law, if you know it                              | Date of notice     |  |  |  |  |  |
| 26 <b>Ha</b> | ve you been a party in  | any judicial or adm     | inistrative proceeding under ar              | ny environmental law? Include settlements and o                      | rders.             |  |  |  |  |  |
|              | No.   |                         |  |  |                    |  |  |  |  |  |
|              | Yes. Fill in the details.   |                         |  |  |                    |  |  |  |  |  |
|              |   |                         | Court or agency                              | Nature of the case   | Status of the case |  |  |  |  |  |
| Part 1       | Give Details Abou   | nt Your Business or C   | onnections to Any Business                   |  |                    |  |  |  |  |  |
|              |   | u filed for bankrupto   | cv. did vou own a business or h              | ave any of the following connections to any busi                     | ness?              |  |  |  |  |  |
|              | -   | · ·                     | - · · · · -                                  | tivity, either full-time or part-time                                |                    |  |  |  |  |  |
|              | A member of a lim   | nited liability compa   | ny (LLC) or limited liability part           | nership (LLP)  |                    |  |  |  |  |  |
|              | A partner in a part   |                         |  |  |                    |  |  |  |  |  |
|              | <u> </u>  |                         | cutive of a corporation                      |  |                    |  |  |  |  |  |
|              | ∐An owner of at lea   | st 5% of the voting     | or equity securities of a corpor             | ration   |                    |  |  |  |  |  |
|              | No. None of the above   | e applies. Go to Part   | 12.  |  |                    |  |  |  |  |  |
|              | Yes. Check all that ap  | ply above and fill in t | he details below for each busine             | SS.  |                    |  |  |  |  |  |
|              | thin 2 years before you   | -                       | ey, did you give a financial state           | ement to anyone about your business? Include al                      | ll financial       |  |  |  |  |  |
|              | No.   |                         |  |  |                    |  |  |  |  |  |
|              | Yes. Fill in the details.   |                         | Date issued                                  |  |                    |  |  |  |  |  |
|              |   |                         | 5410 133464                                  |  |                    |  |  |  |  |  |
|              |   |                         |  |  |                    |  |  |  |  |  |

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| Part 12: Sign Below  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571. |  |  |  |  |  |  |
| 🗶 /s/ Valma L Cherry   | <b>x</b>   |  |  |  |  |  |
| Signature of Debtor 1  | Signature of Debtor 2  |  |  |  |  |  |
| Date 03/16/2017<br>MM / DD / YYYY  | DateMM / DD / YYYY   |  |  |  |  |  |
| Did you attach additional pages to Your Statement of   | Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |  |  |  |  |  |
| No   |  |  |  |  |  |  |
| Yes  |  |  |  |  |  |  |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  |  |  |  |  |  |  |
| No   |  |  |  |  |  |  |
| Yes. Name of person  |  |  |  |  |  |  |
|  | Declaration, and Signature (Official Form 119).                              |  |  |  |  |  |
|  |  |  |  |  |  |  |

|                                 | Caso 17   |  | lod 02/17/17 Ent                   | ered 03/17/17 13:16:3                 | 88 Desc Main  |       |  |  |  |  |  |
|---------------------------------|---|--|------------------------------------|---------------------------------------|---|-------|--|--|--|--|--|
| Fill in this ir                 | nformation to identi  | fy your case:                                |                                    | 1 of 55                               |   |       |  |  |  |  |  |
| Debtor 1                        | Valma   | L  | Cherry                             |                                       |   |       |  |  |  |  |  |
|                                 | First Name  | Middle Name                                  | Last Name                          |                                       |   |       |  |  |  |  |  |
| Debtor 2<br>(Spouse, if filing) | First Name  | Middle Name                                  | Last Name                          |                                       |   |       |  |  |  |  |  |
| United States                   | s Bankruntey Court for t  | the : <u>NORTHERN</u> District of <u>ILI</u> | LINOIS                             |                                       |   |       |  |  |  |  |  |
|                                 |   |  | (State)                            |                                       | Check if this is an                                 |       |  |  |  |  |  |
| Case Numbe<br>(If known)        | r   |  |                                    |                                       | amended filing                                      |       |  |  |  |  |  |
|                                 |   |  |                                    |                                       | -   |       |  |  |  |  |  |
| Official F                      | orm 108   |  |                                    |                                       |   |       |  |  |  |  |  |
| Stateme                         | nt of Intent  | tion for Individuals                         | s Filing Under Ch                  | apter 7                               |   | 12/15 |  |  |  |  |  |
| If you are an in                | dividual filing unde  | r chapter 7, you must fill out th            | is form if:                        |                                       |   |       |  |  |  |  |  |
| ■ creditors hav                 | ve claims secured b   | y your property, or                          |                                    |                                       |   |       |  |  |  |  |  |
| -                               |   | erty and the lease has not expire            |                                    |                                       |   |       |  |  |  |  |  |
|                                 |   |  |                                    | by the date set for the meeting of cr | ·   |       |  |  |  |  |  |
|                                 |   |  | ·                                  | o the creditors and lessors you list. |   |       |  |  |  |  |  |
|                                 |   | gether in a joint case, both are e           | equally responsible for supply     | ing correct information.              |   |       |  |  |  |  |  |
|                                 | nust sign and date t  |  | d attack a consuste about to       | this form. On the top of any addition | !   |       |  |  |  |  |  |
| -                               | -   |  | d, attach a separate sheet to      | this form. On the top of any additior | nai pages,  |       |  |  |  |  |  |
| write your nam                  | e and case number   | (II Known).                                  |                                    |                                       |   |       |  |  |  |  |  |
| Part 1:                         | List Your Creditors V   | Vho Have Secured Claims                      |                                    |                                       |   |       |  |  |  |  |  |
| -                               | For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. |  |                                    |                                       |   |       |  |  |  |  |  |
| Identify the                    | creditor and the pr   | operty that is collateral                    | What do you intend secures a debt? | to do with the property that          | Did you claim the property as exempt on Schedule C? |       |  |  |  |  |  |
| Creditor's                      | ;   |  | ☐ Surrender t                      | he property                           | ☐ No  |       |  |  |  |  |  |
| name:                           |   |  | Retain the p                       | property and redeem it                | _<br>□ Yes  |       |  |  |  |  |  |
| <b>D</b>                        | •   |  | _                                  | property and enter into a             | □ 163   |       |  |  |  |  |  |
| Description                     | on of   |  |                                    | on Agreement.                         |   |       |  |  |  |  |  |
| property<br>securing            | deht:   |  |                                    | _                                     |   |       |  |  |  |  |  |
| Securing                        | uebi.   |  |                                    | property and [explain]:               | <u> </u>  |       |  |  |  |  |  |
| Over dite via                   |   |  |                                    | ha nanantu.                           |   |       |  |  |  |  |  |
| Creditor's name:                | •   |  | Surrender t                        |                                       | □ No  |       |  |  |  |  |  |
| marric.                         |   |  | <u>=</u>                           | property and redeem it                | ☐ Yes   |       |  |  |  |  |  |
| Description                     | on of   |  | _                                  | property and enter into a             |   |       |  |  |  |  |  |
| property                        |   |  | Reaffirmation                      | on Agreement.                         |   |       |  |  |  |  |  |
| securing                        | debt:   |  | Retain the p                       | property and [explain]:               |   |       |  |  |  |  |  |
|                                 |   |  |                                    |                                       |   |       |  |  |  |  |  |
| Creditor's                      | <b>3</b>  |  | ☐ Surrender t                      | he property                           | □No   |       |  |  |  |  |  |
| name:                           |   |  | Retain the                         | property and redeem it                | Yes   |       |  |  |  |  |  |
| Decement                        | on of   |  |                                    | property and enter into a             |   |       |  |  |  |  |  |
| Description                     | ווט ווע   |  | <del>-</del>                       | on Agreement.                         |   |       |  |  |  |  |  |
| property securing               | deht:   |  |                                    | property and [explain]:               |   |       |  |  |  |  |  |
| Securing (                      | ucsi.   |  | ☐ Ketaiii tile                     | Toporty and [explain].                | <u> </u>  |       |  |  |  |  |  |
| <b>0</b>                        |   |  |                                    |                                       |   |       |  |  |  |  |  |
| Creditor's                      | 3   |  | ☐ Surrender t                      | * * *                                 | □No   |       |  |  |  |  |  |
| name:                           |   |  | ∐ Retain the p                     | property and redeem it                | Yes   |       |  |  |  |  |  |

Retain the property and enter into a

Retain the property and [explain]: \_

Reaffirmation Agreement.

Description of

securing debt:

property

Debtor 1

Part 2:

Valma

Case 17-08420

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First Name

**List Your Unexpired Personal Property Leases** 

| Describe your unexpired personal property leases  Lessor's name:  Description of leased property:  Lessor's name:  Description of lease | fill in the information below. Do not list real estate lea | isted in Schedule G: Executory Contracts and Unexpired Leases. Unexpired leases are leases that are still in effect; the erty lease if the trustee does not assume it. 11 U.S.C. § 365( | lease period has not yet   |
|--|--|---|----------------------------|
| Description of leased property:  Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased   Yes   Description of | Describe your unexpired personal property lease            | s   | Will the lease be assumed? |
| Description of leased property:  Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased property:    Lessor's name:   No   Yes   Description of leased   Yes   Description of |  |   | П №                        |
| Description of leased property:  Lessor's name:   No   Yes    Description of leased   Yes     |  |   |                            |
| Description of leased property:  Lessor's name:  Description of leased property:  Signature of Debtor 2  Date: Date: 03/16/2017  |  |   | , <del>-</del> ··          |
| Description of leased property:  Lessor's name:  | Lessor's name:   |   | <u> </u>                   |
| Description of leased property:  Lessor's name:  Description of leased property:  Description of leased property:  Lessor's name:  Description of leased property:  Description of leased property:  Description of leased property:  Description of leased property:  Description of leas |  |   | ∐ Yes                      |
| Description of leased property:  Lessor's name:   No   Yes   Description of leased property:   | Lessor's name:   |   |                            |
| Description of leased property:  Lessor's name:  Description of leased property:  Sign Below  Lessor's name:  Description of leased property:  Signa Below  Signature of Debtor 1  Date Dated: 03/16/2017  Date Dated: 03/16/2017   |  |   | ∐Yes                       |
| Description of leased property:  Lessor's name:  Description of leased property:  Sign Below  Lessor's name:  Description of leased property:  Signature of Debtor 1  Date Dated: 03/16/2017  Date Dated: 03/16/2017  | Lessor's name:   |   |                            |
| Description of leased property:  Lessor's name:  Description of leased property:  Lessor's name:  Description of leased property:  Lessor's name:  Description of leased property:  Part 3: Sign Below  Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.  X /s/ Valma L Cherry Signature of Debtor 1 Date Dated: 03/16/2017 Date Deted: 03/16/2017  |  |   | ∐Yes                       |
| Description of leased property:  Lessor's name:  | Lessor's name:   |   |                            |
| Description of leased property:  Lessor's name:  |  |   | ∐Yes                       |
| Description of leased property:  Lessor's name:  | Lessor's name:   |   |                            |
| Description of leased property:    Yes   Yes   Yes   Yes   |  |   | ∐Yes                       |
| Description of leased property:  Part 3: Sign Below  Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.   ***  **  **  **  **  **  **  **  **   | Lessor's name:   |   |                            |
| Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.     Ys/Valma L Cherry  |  |   | Yes                        |
| As / Valma L Cherry Signature of Debtor 1  Date _ Dated: 03/16/2017  Date _ Dated: 03/16/2017  | Part 3: Sign Below   |   |                            |
| Date Dated: 03/16/2017   |  |   | a debt and any             |
| Date Dated: 03/16/2017   | <del>-</del>   | <b>x</b>  | <u> </u>                   |
|  |  | Signature of Debtor 2   |                            |
| IVIIVI / 1/1/ / 1 1 1 1  | Date Dated: 03/16/2017  MM / DD / YYYY                     | Date  |                            |

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B2030 (Form 2030) (12/15)

Date

## United States Bankruptcy Court

|          | NORTHERN DISTI   | RICT OF ILLINOIS EA                                       | STERN DIVISIO                              | ON  |           |
|----------|--|---|--|---|-----------|
| In 1     | re   |   |  |   |           |
| Val      | lma L Cherry / Debtor  |   | Case No:                                   |   |           |
|          |  |   | Chapter:                                   | Chapter 7                                 |           |
|          | DISCLOSURE OF COL  | MPENSATION OF ATT   | ORNEY FOR DEF                              | RTOR                                      |           |
|          | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(1) in pensation paid to me within one year before the filing of the dered or to be rendered on behalf of the debtor(s) in contermand. | b), I certify that I am the a the petition in bankruptcy, | ttorney for the above or agreed to be paid | re named debtor(s<br>d to me, for service | es        |
|          | For legal services, I have agreed to accept  | \$1,200.00  |  |   |           |
|          | Prior to the filing of this statement I have received  | \$1,600.00  |  |   |           |
|          | Balance Due  | \$0.00  |  |   |           |
|          | Post Case-Filing Work Pre-Paid:  | \$400.00  |  |   |           |
| 2.       | The source of the compensation paid to me was:   |   |  |   |           |
|          | Debtor(s) Other: (specify)   |   |  |   |           |
| 3.       | The source of compensation to be paid to me is:  |   |  |   |           |
|          | Debtor(s) Other: (specify)   |   |  |   |           |
| 4.       | I have not agreed to share the above-disclosed compof my law firm.   | pensation with any other po                               | erson unless they ar                       | e members and as                          | ssociates |
|          | I have agreed to share the above-disclosed compens of my law firm. A copy of the agreement, together attached.   |   |  |   |           |
| 5.       | In return for the above-disclosed fee, I have agreed to rerease, including:  | nder legal service for all as                             | pects of the bankru                        | ptcy                                      |           |
|          | <ul> <li>Analysis of the debtor's financial situation, and reno<br/>bankruptcy;</li> </ul>   | dering advice to the debtor                               | in determining who                         | ether to file a peti                      | tion in   |
|          | b. Preparation and filing of any petition, schedules, sta  | tements of affairs and plan                               | n which may be requ                        | uired;                                    |           |
| 6        | By agreement with the debtor(s), the above-disclosed fee   | e does not include the follo                              | wing service:                              |   |           |
| <b>.</b> | Fee does NOT include any work done post-filing.  | does not metade the fono                                  | wing service.                              |   |           |
|          | 1  | CERTIFICATION   |  |   |           |
|          | I certify that the foregoing is a complete payment to me for representation of the debt  | 2 0   | •  | or  |           |
|          | Date: 03/16/2017   | /s/ Adam Emil Suchy                                       |  |   |           |

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Signature of Attorney

Geraci Law L.L.C. Name of law firm

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Headquarters: 55 E. Monroe Street, #3400 Chicag

866.925.0707

CLIENT CORNER WWW.INFOTAPES.COM

Date: 3/16/2017 Consultation Attorney: ADD

Record #: 724-009

## Retainer Agreement Chapter 7 - Pre-filing

| Services before filing in Court: I retain Geraci Law L.L.C. to prepare to file a Chapter 7 bankruptcy petition in court. I agree to pay, by   |
|---|
| debit only, a flat fee for services <b>before</b> filing in court of \$ 1,200.00  |
| at \$ {} today, \$ {} per {} starting {} and \$ {} within 60 days of today. Bankruptcy is time-sensitive  |
| may pay more than this amount to pre-pay post-filing services. After filing in court, any balance on the pre-filing fee is discharged. We will  |
| start preparing your documents as soon as you sign this contract. Work before signing is no charge. Work or Costs advanced AFTER filing in Court is not included in the pre-filing amount, unless you pay us for it in advance:   |
| After we file your Chapter 7 bankruptcy in Court, we will advance your Court Cost of \$335, and the flat fee for services after case filing is \$ 895.00 & \$335 = \$ 1.230.00 total flat fee. We will present you with an agreement to repay the \$335, and pay a fee for our services after filing through Discharge or case closing without discharge. Whether or not you sign a post-filing agreement is entirely   |
| voluntary: you are not required to retain Geraci Law for post-bankruptcy services. You may hire some other law firm to finish your bankruptcy and Geraci Law may withdraw from representing you.  |
| The flat fee for pre-filing work pays for: consultation after hiring us, (before retaining us is free) preparation petition and schedules, means test & statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email attachments, web uploads and mail; office appointment to review and sign your petition; filing your case in court. Excluded: appearance in any court of proceeding; taking calls from your creditors or bill collectors. If you decide to pre-pay, or pay for ALL services before and after we file your case in court, all work until case closing is included except: missed section 341 meetings; amendments to schedules; adversary proceedings; any motions including to reopen, avoid judgment liens, for enlargement of time; any contested matter including but not limited to objections to exemptions, motions to dismiss; attending rule 2004 examinations; reviewing documents that we did not specifically request from you; appearance other than bankruptcy court.   |
| Flat fee. With "flat fee", rather than hourly, you know in advance your entire cost unless additional work is required and it usually is cheaper, but you may choose to pay for our services billed hourly at \$75 -\$450/hour, and pay in advance a security retaier, which may cost you more, or less than a flat fee Advance Payment Retainer. Payments on flat fee or hourly become our property on payment and are deposited into our operating account, not into a client trust account. We will only refund unearned fees You may enter into a security retainer agreement with another law firm: we will not because you may lose funds held in our trust account which may be assets in a Chapter 7.   |
| <b>Termination</b> . If you decide not to proceed, delay, fail to respond, fail to pay my attorneys or provide all information & sign my petition according to this schedule, I agree that Geraci Law may discontinue work and charge me for the work done to date at hourly rates shown above. We will only refund fees not earned. <b>Wisconsin</b> : We will submit any unresolved dispute about the fee to binding arbitration within 30 days or receiving written notice of the dispute. You may file a claim with the Wisconsin Lawyers' Fund for Client Protection if the we fail to provide a refund or unearned advanced fees. If you dispute the amount of the fee and want that dispute to be submitted to binding arbitration, you must provide written notice of the dispute to Geraci Law within 30 days of the mailing of the accounting. If we are unable to resolve the dispute to the satisfaction of you within 30 days after notice of the dispute from the client, we shall submit the dispute to binding arbitration.   |
| Time matters: You agree: to fully cooperate with us and provide all information required; use Client Corner and not to cause excessive work; that more than one attorney or staff will work on your file there is no extra charge for the entire Geraci Law Team, unlike single attorney "law firms". Change in circumstances: This flat fee is based on the facts you told us. If that changes, your fee may change. Exemption laws only protect a limited amount of property. File Chapter 13 if you have property not claimed as exempt, or risk turn over "non-exempt" property to a Trustee. No guarantee of Discharge Creditors or others may object to a chapter 7 discharge of certain debts or to any discharge, for a variety of reasons. Debts not discharged: studer loans; educational debts and tuition; most tax debts; undisclosed debts; maintenance or support; fines; fraud, stealing or intentional injury claims, debt after filing including HOA dues; other debts listed in your green folder as usually not discharged. No discharge if you don't take the 2nd educational course. I will not transfer or acquire any property or incur any credit or debt before filing, and I must make full disclosure of all income, expenses, debt |
| ate: 31/02017 Dama (Herry (Debtor) X (Joint Debtor)   |
| Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 161112   |
| Attorney for the Debion(s), Representing Geraci Law E.E.C. 169 101/12   |
|   |

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Valma L Cherry / Debtor Bankruptcy Docket #:

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 03/16/2017 /s/ Valma L Cherry

Valma L Cherry

X Date & Sign

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<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

## UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

B 201A (Form 201A) (11/11) 724009 Page 1 of 2 Record #

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Form B 201A, Notice to Consumer Debtor(s)

In re Valma L Cherry / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 03/16/2017 | /s/ Valma L Cherry        |   |
|-------------------|---------------------------|---|
|                   | Valma L Cherry            | _ |
| Dated: 03/16/2017 | /s/ Adam Emil Suchy       |   |
|                   | Attorney: Adam Emil Suchy | _ |

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Valma Cherry Case Number (if known) Dehtor 1 Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? \_\_No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and administrative expenses TYes. are paid that funds will be available for distribution to unsecured creditors? 1,000-5,000 **25,001-50,000** 1-49 18. How many creditors do 5,001-10,000 50,001-100,000 you estimate that you 50-99 owe? **100-199 1**0,001-25,000 ☐ More than 100,000 200-999 □\$500,000,001-\$1 billion \$0-\$50,000 ☐ \$1,000,001-\$10 million 19. How much do you □\$1,000,000,001-\$10 billion estimate your assets to \$50,001-\$100,000 ■ \$10,000,001-\$50 million be worth? ■\$10,000,000,001-\$50 billion **\$100,001-\$500,000** \$50,000,001-\$100 million \$100,000,001-\$500 million ☐More than \$50 billion ☐ \$500,001-\$1 million □\$500,000,001-\$1 billion \$0-\$50,000 ☐ \$1,000,001-\$10 million How much do you □ \$1,000,000,001-\$10 billion estimate your liabilities ☐ \$10,000,001-\$50 million \$50,001-\$100,000 □ \$10,000,000,001-\$50 billion to be? \$100,001-\$500,000 \$50,000,001-\$100 million ☐ More than \$50 billion \$500,001-\$1 million \$100,000,001-\$500 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 4841, 1519, and 3571. Signature of Debtor Executed on Executed on MM / DD / YYYY MM / DD / YYYY

Record # 724009

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| Fill in this in           | If in this information to identify your case: |                                     |                     |   |  |  |
|---------------------------|---|-------------------------------------|---------------------|---|--|--|
| Debtor 1                  | Valma   | L                                   | Cherry              |   |  |  |
| DCDIOI 1                  | First Name                                    | Middle Name                         | Last Name           | - |  |  |
| Debtor 2                  |   |                                     |                     | _ |  |  |
| (Spouse, if filing)       | First Name                                    | Middle Name                         | Last Name           |   |  |  |
| United States             | Bankruptcy Court for                          | r the : <u>NORTHERN</u> District of | ILLINOIS<br>(State) |   |  |  |
| Case Number<br>(If known) |   |                                     | <u> </u>            |   |  |  |
|                           |   |                                     |                     |   |  |  |

## Official Form 106 Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

|  |                 | Sign Below   |                             |   |
|--|-----------------|--|-----------------------------|---|
|  | Did you p       | ay or agree to pay someone who is NOT an attorney to l     | help you fill out bankrupto | ey forms?   |
| MANAGEMENT AND | Yes.            | . Name of Person   | <del>.</del>                | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| ***************************************            |                 |  |                             |   |
| ***************************************            | Under per       | nalty of perjury, I declare that I have read the summary a | and schedules filed with t  | his declaration and that they are true and  |
|  | <b>x</b> Signat | Talsa Live of Debtor 1                                     | Signature of Debtor 2       | <del></del>   |
| ***************************************            | Date _          | 3 12 12017<br>MM / DD / YYYY                               | DateMM / DD / YY            | YY  |

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| Debtor 1 | Valma      | L           | Cherry    | Case Number (if known) |  |
|----------|------------|-------------|-----------|------------------------|--|
|          | First Name | Middle Name | Last Name |                        |  |

| Part 12: Sign Below   |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bapkruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date  MM / DD / YYYY  Date  MM / DD / YYYY |  |  |  |  |  |  |  |  |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?   |  |  |  |  |  |  |  |  |
| No  |  |  |  |  |  |  |  |  |
| □ Yes   |  |  |  |  |  |  |  |  |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?   |  |  |  |  |  |  |  |  |
| ■No   |  |  |  |  |  |  |  |  |
| Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).  |  |  |  |  |  |  |  |  |
| Declaration, and Signature (Gindan 1871).   |  |  |  |  |  |  |  |  |

Entered 03/17/17 13:16:38 Desc Main Case 17-08420 Doc 1 Filed 03/17/17 **Document** Page 51cost no for (if known) Valma Debtor 1 **List Your Unexpired Personal Property Leases** Part 2: For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? ☐ No Lessor's name: American Homes 4 Rent Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: □ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property:

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any

personal property that is subject to an unexpired lease.

Signature of Debtor 1

Signature of Debtor 2

Date Dated: 3/2 /2017

Date \_\_\_\_\_\_\_MM / DD / YYYY

## Case 17-08420 Doc 1 Filed 03/17/17 Entered 03/17/17 13:16:38 Desc Main DISCLAIMER Deptors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signers and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

  (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
   Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit,
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.

| 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans    |     |
|---|-----|
| The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the       |     |
| bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the ca | ise |
| is filed in Court AND INE HAVE TO BEAD CHECK & MAKE SUDE OUD METITION IS A COUD TEN   |     |

Dated: 2 / 6 /2017

Valma L Cherry

X Date & Sign

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Valma L Cherry / Debtor

Bankruptcy Docket #:

Judge:

### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated:<u>②\_/\_\_\_\_/</u>/2017

Valma L Cherry

X Date & Sign

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| De   | btor 1          | Valma                                     | L   | Cherry  | Case Number (if know                 | n)                             |                  |                            |
|--|-----------------|---|---|---|--------------------------------------|--------------------------------|------------------|----------------------------|
| ì  |                 | First Name                                | Middle Name   | Last Name   |                                      |                                |                  |                            |
|  |                 |   |   |   | Column A Debtor 1                    | Column B Debtor 2 o non-filing | or               |                            |
| 8.   | Unem            | ployment compe                            | ensation  |   | \$0.00                               |                                | \$0.00           |                            |
|  | Do not          | t enter the amour                         | nt if you contend that the amount ity Act. Instead, list it here:   | received was a benefit  |                                      |                                | <del>10.00</del> |                            |
|  | For yo          | ou  |   |   |                                      |                                |                  |                            |
|  | For yo          | our spouse                                |   |   |                                      |                                |                  |                            |
| 9.   | Pensi<br>benef  | ion or retirement<br>it under the Socia   | t <b>income.</b> Do not include any amo<br>al Security Act.   | ount received that was a                                      | \$3,358.09                           |                                | \$0.00           |                            |
| 10   | Do no<br>as a v | ot include any ber<br>victim of a war cri | sources not listed above. Speci<br>nefits received under the Social S<br>me, a crime against humanity, or<br>, list other sources on a separate | ecurity Act or payments received<br>international or domestic |                                      |                                |                  |                            |
|  | 10a             |   | ۹   |   | \$0.00                               | \$                             | 0.00             |                            |
|  | 10b             |   |   |   | \$ 0.00                              |                                | \$0.00           |                            |
|  | 10c. T          | otal amounts from                         | m separate pages, if any.   |   | \$0.00                               |                                | \$0.00           |                            |
| 11   |                 |   | urrent monthly income. Add line total for Column A to the total for   |   | \$3,358.09                           | +                              | \$0.00 =         | \$3,358.09                 |
|  | Part 2:         | Determine \                               | Whether the Means Test Applies to   | You   |                                      |                                |                  |                            |
| 12   |                 |   | it monthly income for the year. F   |   | Copy line 11 here                    |                                | 12a,             | <b>62.250.00</b>           |
| 000000000000000000000000000000000000000  | 12a.            |   |   | T1  | Copy line 11 here                    |                                | 12a.             | \$3,358.09                 |
| 50000000000000000000000000000000000000   | 12b.            |   | he number of months in a year).<br>ur annual income for this part of th   | e form  |                                      |                                | 12b.             | × 12<br><b>\$40,297.08</b> |
| 10   |                 | _   | family income that applies to yo  |   |                                      |                                |                  | Ψ-10,207.00                |
| '`   | . Calcu         | nate the median                           | taining moome that applies to ye  | a. I olioti tilese steps.                                     | _                                    |                                |                  |                            |
| oor and and on our little  | Fill in         | the state in whic                         | h you live.   | IL  | _                                    |                                |                  |                            |
| order sees of the control of the con | Fill in         | the number of pe                          | eople in your household.  | 1   |                                      |                                |                  |                            |
|  | To fin          | d a list of applica                       | ly income for your state and size on<br>the median income amounts, go on<br>m. This list may also be available                                  | online using the link specified in                            | the separate                         |                                | 13.              | \$50,133.00                |
| 14   | . How           | do the lines com                          | npare?  |   |                                      |                                |                  |                            |
|  | 14a.            | x Line 12b is les<br>Go to Part 3.        | ss than or equal to line 13. On the   | top of page 1, check box 1, The                               | ere is no presumption of abuse.      |                                |                  |                            |
| management and a second a second and a second a second and a second and a second and a second and a second an | 14b.            |   | ore than line 13. On the top of pag<br>and fill out Form 122A-2.  | ge 1, check box 2, <i>The presump</i>                         | tion of abuse is determined by Forn  | n 122A-2.                      |                  |                            |
|  | Part 3:         | Sign Below                                |   |   |                                      |                                |                  |                            |
|  |                 | By signing neve                           | Valma L Cherry  | y that the information on this state                          | tement and in any attachments is tru | ie and correct.                |                  |                            |
|  |                 | Date: —                                   | <u>)</u> 1 <u>2</u> 12017   | _   |                                      |                                |                  |                            |
| ***************************************  |                 | If you checked I                          | ine 14a, do NOT fill out or file For  | m 122A-2.   |                                      |                                |                  |                            |
| ***************************************  |                 | if you checked i                          | ine 14b, fill out Form 122A-2 and   | file it with this form.                                       |                                      |                                |                  |                            |

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Desc Main

Form B 201A, Notice to Consumer Debtor(s)

In re Valma L Cherry / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

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WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 3 / A /2017

Valma L Cherry

X Date & Sign

Dated: 3/2/2017

Attorney: Adam Emil Suchy

Record # 724009

Form B 201A, Notice to Consumer Debtor(s)

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